

# **STATE OF SOUTH CAROLINA**

## **OFFICE OF THE LIEUTENANT GOVERNOR**



# **ANNUAL ACCOUNTABILITY REPORT**

## **Fiscal Year 2008–2009**

### **SEPTEMBER 15, 2009**

**The Honorable André Bauer**  
**Lieutenant Governor of South Carolina**

## **Accountability Report Transmittal Form**

Agency Name: **SC Lieutenant Governor's Office**

Date of Submission: **September 15, 2009**

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## Section I: Executive Summary

### 1.1 Mission, Values, and Vision

Under Lt. Governor André Bauer's direction, the Office of the Lieutenant Governor provides leadership where and whenever possible on legislative matters and public policy for the State of South Carolina. The Vision of his office is to be a key factor in developing methods for efficient government, and a progressive plan to improve the state's economy and promote economic development and jobs.

The Lt. Governor's Office on Aging (LGOA) is the designated "State Unit on Aging" (SUA) as required by the Older Americans Act (OAA). The OAA intends that the SUA shall be the leader relative to all aging issues on behalf of all older persons in the state. Enabling legislation for the SUA is found in Title 43 of the Code of Laws of South Carolina, 1976, as amended. Proviso 73.2 of the 2004-2005 Appropriations Act placed the SUA in the Office of the Lt. Governor, and this proviso was codified by S.530 in 2008, permanently placing the Office on Aging under the authority of the Lieutenant Governor. It is through the Older Americans Act and The State Code of Laws that Lt. Governor Bauer is the chief advocate for South Carolina's senior citizens.

Through Lt. Governor Bauer's guidance, the Mission of the LGOA is to meet the present and future needs of seniors and to enhance the quality of life for seniors through advocating, planning, and developing resources in partnership with state and local governments, non-profits, the private sector, and individuals.

Lt. Governor Bauer has established Values for the LGOA that put South Carolina seniors first. The values of the LGOA are customer service, excellence in government, person-centered care, teamwork, and research-based decision-making.

The Vision set for the LGOA by Lt. Governor Bauer allows for seniors to enjoy an enhanced quality of life, contribute to communities, have economic security, and receive supports necessary to age independently with choice and dignity.

### 1.2 Major Achievements from Past Year

- A. In a tight budget year, Lt. Governor Bauer continued to champion the cause to have more seniors served under Home and Community-Based Services (senior meals). The Lieutenant Governor worked closely with the General Assembly to ensure that the \$2.9 million for Home and Community-Based Services State Supplemental was appropriated for Fiscal Year 2009-2010, thereby ensuring that South Carolina seniors receive critical nutritional services through home delivered and congregate meals.
- B. The Alzheimer's Disease Purple Ribbon Task Force submitted to the Legislature their report entitled "*Conquering the Specter of Alzheimer's Disease in South Carolina.*" Twenty recommendations were made by the task force, covering diverse aspects of working with individuals with Alzheimer's disease and their caregivers, as well as a suggested timeframe for implementation.
- C. The Alzheimer's Resource Coordination Center (ARCC) awarded \$157,500 to provide respite or educational programs. Five first-year and four second year-grants were awarded.
- D. Lt. Governor Bauer hosted public hearings and listening events statewide to hear from senior citizens who have been targets of scams and fraud. These listening events are ongoing and designed to allow the Lieutenant Governor to have personal time to meet with victims and their families. LGOA staff is coordinating an education campaign and providing constituent services to those who have been victims of scams. A Scams Education Guide was distributed and a 2009 Annual Report was provided to the members of the Joint Legislative Committee on Aging.
- E. Lt. Governor Bauer continues to advocate attracting more geriatric physicians to South Carolina for which \$105,000 was appropriated to continue the Geriatric Loan Forgiveness Program. Since inception, 15 geriatric physicians have received a total of 17 loan forgiveness awards to establish practices in South Carolina. Three more \$35,000 loans were awarded this year.
- F. Working with the Legislature, Lt. Governor Bauer ensured that the Silver Haired Legislature was effectively funded to advocate for seniors in South Carolina. The Silver Haired Legislature provides guidance and counseling to the Governor, Lieutenant Governor, Office on Aging and to the General Assembly.

- G. Regional Family Caregiver Advocates worked one-on-one with 5,932 caregivers, providing assistance, support, counseling, and assessment for a total of 16,779 contacts. The program also paid for 144,605 hours of respite care to caregivers.
- H. Over 495,207 Medicare beneficiaries were reached through regional events; 26,756 beneficiaries were assisted through one-on-one contacts.
- I. The Medicare Fraud and Senior Medicare Patrol educated beneficiaries on the cost of Medicare Fraud. Through counseling, 6,931 beneficiaries were assisted and an additional 14,859 were reached through community events.
- J. Regional Information and Referral Specialists handled 19,978 requests for information and referrals. The LGOA sponsored nine IR&A continuing education trainings for specialists.
- K. Five Aging and Disabilities Resource Centers (ADRC) are operating in South Carolina, covering 25 of 46 counties.
- L. Lt. Governor Bauer worked with the private sector to establish and fund a Public Service Announcement (PSA) campaign on cable television stations throughout the state. The campaign focused on fraud prevention and the Office on Aging's innovative SCACCESS web service.
- M. Lt. Governor Bauer initiated several health campaigns in Fiscal Year 2008-2009 including the Lt. Governor's Challenge. The Challenge is a 12-week reward based program where participants may choose to work toward heart health through fitness choices and health choices. Included in this initiative were the "*Your Heart is in Your Hands*" public health campaign and numerous mall walks throughout South Carolina.
- N. Lt. Governor Bauer was awarded the *2008 Regional Impact Award* from the eight-state Southeastern Association of Area Agencies on Aging for being a forceful and effective advocate for the elderly in South Carolina.
- O. Abiding by Federal Administration on Aging regulations, the 10 Area Agencies on Aging (AAAs) awarded service contracts to Aging Service Contractors in Fiscal Year 2008-2009 using a competitive procurement process. Contractors were required to attend a mandatory proposal conference with the AAAs and then submitted proposals. Fifty-five competitive procurement contracts were accepted for Fiscal Year 2009-2010. Prior to this contract round there were 58 aging service contractors for the 10 AAAs.
- P. The LGOA was awarded the 2009 South Carolina State Library "*Notable State Document Award*" for Agency Web Site Design. This award recognizes the Lt. Governor's efforts to provide "easy access" for senior information, data, and senior services in South Carolina. In addition, the LGOA web site ([www.aging.sc.gov](http://www.aging.sc.gov)) also provides news important to the aging network and senior citizens seeking critical services from the state. The site also provides the Aging News Service which compiles news and information of interest to South Carolina's aging community. The web site also includes SCACCESS, a web based directory designed to help older South Carolinians, disabled adults, and others who need long-term care supports locate the services available in their local communities.

### 1.3 Key Strategic Goals for the Present and Future Years

#### GOAL 1: IMPROVE PROTECTIONS FOR THE STATE'S VULNERABLE ADULTS

**Strategic Goal 1:** Provide programs, education and information to protect seniors from fraud and scams.

**Strategic Goal 2:** Administer the LTC Ombudsman Program as mandated under OAA and state statutes.

**Strategic Goal 3:** Develop programs for the prevention of elder abuse, neglect, and exploitation.

**Strategic Goal 4:** Provide Elder Rights and Legal Assistance Programs for the elderly.

#### GOAL 2: IMPROVE QUALITY AND LENGTH OF HEALTHY LIFE FOR THE SENIOR POPULATION

**Strategic Goal 1:** Promote opportunities for seniors and their families to help exercise more control of and access to the services they receive.

**Strategic Goal 2:** Provide programs, education and information to help seniors prevent or delay the onset of chronic conditions and maintain independence and quality of life.

**Strategic Goal 3:** Provide Medicare, Medicaid, and long term care information to seniors.

**Strategic Goal 4:** Promote development and increased utilization of senior centers to provide information and services that encourage socialization, health, and education.

**Strategic Goal 5:** Support the protection of vulnerable seniors in times of disaster.

**Strategic Goal 6:** Provide information on Alzheimer's disease and related dementias and seed grants to community organizations for education and respite programs.

**Strategic Goal 7:** Partner with the Area Agencies on Aging (AAA) to deliver information, assistance, training, and respite to family members caring for seniors and seniors raising grandchildren.

**Strategic Goal 8:** Provide emergency rental assistance to eligible seniors.

**GOAL 3: EFFICIENTLY MANAGE OAA AND STATE RESOURCES FOR MANDATED SERVICES**

**Strategic Goal 1:** Maintain and support the competitive procurement process for services.

**Strategic Goal 2:** Request, plan, allocate, and advocate for state resources.

**Strategic Goal 3:** Provide administrative support to include accounting, budgeting, payroll, and information technology to the LGOA.

**Strategic Goal 4:** Monitor subgrantees to ensure compliance with federal and state requirements.

**GOAL 4: PROVIDE INFORMATION ON TRENDS/ISSUES IMPACTING QUALITY OF LIFE**

**Strategic Goal 1:** Increase awareness of aging issues; encourage consensus for policy changes.

**Strategic Goal 2:** Provide ongoing training and educational activities for seniors.

**Strategic Goal 3:** Enhance research and data collection on effectiveness of aging services.

**Strategic Goal 4:** Meet federal and state reporting requirements on a timely basis.

**Strategic Goal 5:** Establish ongoing training to improve staff knowledge of computer software.

## 1.4 Key Strategic Challenges

### A. LGOA strategic challenges

The 2008-2009 fiscal year brought many challenges to state government. Since July 1, 2008 the Lieutenant Governor's Office budget has been cut 23.1% for a total of \$1.1 million. The cuts came in rounds of 3%, 13.1% and 7%. The Lieutenant Governor's Office absorbed the first round (\$145,000 cut) without passing it to our regional partners. This was not possible in the second or third round cuts. With the final budget cuts, \$581,000 was reduced from the Lieutenant Governor's budget and \$365,000 in cuts was divided among the 10 Area Agencies on Aging Regions. The Appalachia (Region 1) Area Agency on Aging, which is the largest in South Carolina, took a \$52,000 cut. Each AAA has the discretion as to how they take budget cuts whether through administrative costs or cutting services, or a combination there of.

The loss of General Fund dollars resulted in numerous cost saving measures being taken by the Lieutenant Governor's Office in order to continue providing critical services for seniors without any loss of quality. Most of the funding received by the LGOA is obtained through federal sources and is specifically earmarked for services or is Pass Through Funding, making state General Funds critical for providing senior services.

During Fiscal Year 2008-2009, the LGOA reduced operating expenditures by cutting staff and not filling 13 vacancies, mandating a 10-day furlough for all staff including Lt. Governor Bauer, decreasing staff travel, cutting supply purchases and streamlining its office lease in the Wilbur Smith Building to reduce the size of the office suite. These cost cutting measures were taken so that South Carolina seniors would continue to receive services from the Office on Aging without interruption or loss of quality. Through these actions the LGOA was able to protect seniors and continued providing critical services throughout South Carolina.

The LGOA, its stakeholders, and partners provide a wide range of services to South Carolina's citizens. A key challenge is to provide cost efficient services. The many organizations that are funded through the LGOA need support, guidance, and assistance. The LGOA faces several strategic challenges over the next five years: During Fiscal Year 2008-2009, the LGOA reduced operating expenditures by cutting staff, mandating a ten day furlough for all staff, decreasing staff travel, cutting supply purchases and cutting the size of the office lease at the Wilbur Smith Building. These cost cutting measures were enacted so that South Carolina seniors would continue to receive services from the Office on Aging without interruption.

- The LGOA must obtain adequate funding to provide cost efficient services to seniors and their families in order to ensure they have an enhanced quality of life. The number of senior citizens in South Carolina is expected to increase steadily and over 1.2 million baby boomers are set to retire in the next few years, and the demand for critical senior services will grow. **One of our key goals is to provide those services**

**which will enable South Carolina to control health care costs with the knowledge that the state's financial resources are limited.**

- The LGOA must develop evidence-based decision-making processes in order to obtain resources necessary to meet the current and future needs of our state's seniors.
- The LGOA faces the challenge of redirecting a 36- year-old service system into one that is market-driven and provides consumer choice.
- The LGOA must continue to educate citizens regarding planning for retirement, health care, and the potential need for long term care. The government cannot provide for all needs in retirement. Resources will be limited, and the responsibility rests with the individual to plan for quality of life. The LGOA must make available reliable and appropriate information for informed decision-making and planning.

## **B. Limited Resources and a Growing Population in Need of Services**

During Fiscal Year 2008-2009, the LGOA reduced operating expenditures by cutting staff and not filling 13 vacancies, mandating a 10-day furlough for all staff including Lt. Governor Bauer, decreasing staff travel, cutting supply purchases and streamlining its office lease in the Wilbur Smith Building to reduce the size of the office suite. These cost cutting measures were taken so that South Carolina seniors would continue to receive services from the Office on Aging without interruption or loss of quality. Through these actions the LGOA was able to protect seniors and continue providing critical services. Our service providers are continuing to operate with limited resources and are being impacted by the economy. As in years past, volunteers were not able to afford the gasoline necessary to deliver meals and provide transportation. As a result, service providers were forced to reduce service provision for the frailest, most vulnerable segment of the population. As it has in recent years, the General Assembly provided significant relief for Fiscal Year 2008-2009 through a \$2,900,000 supplemental appropriation for home and community based services. This was a major step toward addressing the needs of our state's senior population. The Legislature has again appropriated the \$2,900,000 supplemental funding for Fiscal Year 2009-2010. However, unlike in the past, the supplemental funds are restricted to senior meals only and cannot be used for other critical home and community based services.

## **C. Health Care Needs of the Aging Population**

South Carolina must plan to meet the aging population's health needs to support a sustainable quality of life. Poor health and disabilities are not inevitable consequences of aging. To meet our health needs we must focus on prevention services for chronic diseases rather than expensive institutionalization.

Senior health issues have less to do with funding, since over 95% are covered by health insurance, and more to do with lack of access to preventative services and failure to adopt a healthy lifestyle. Although covered by Medicare, only one third of older Americans are receiving the benefits of immunizations and cancer screening.

One in seven seniors in South Carolina lives below poverty level, and is dually qualified for Medicaid and Medicare coverage. Another group, with incomes less than 200% of poverty, may qualify for Medicaid coverage of long term care needs.

## **D. Family Caregivers**

There are 560,000 family caregivers in South Carolina who provide 610,000,000 hours of care per year at an estimated value of over \$5.5 billion. Annually 15% of the workforce becomes full-time caregivers. When 1,500 caregivers stop working, \$22 million in purchasing power is lost to the SC economy. Without caregivers, 50% of care recipients would go to a nursing home and cost the state \$7.4 million in state funds to provide Medicaid nursing home care for one year.

## **E. Transportation**

Transportation is critical for seniors to remain independent. The local Councils on Aging and the Area Agencies on Aging participate in the State's efforts to coordinate transportation services at the local level, even though funding sources are limited and fuel prices have increased. Innovative non-profits like the Independent Transportation Network in Charleston provide service for seniors and people with visual impairment at a nominal expense to the clients. The LGOA also worked with the SC Department of Transportation in Fiscal Year 2008-2009 and served as a member of the Mass Transit and Human Services Transportation Programs Study Committee, which was a legislatively authorized committee working to find transportation solutions.

**F. Increasing Number of Alzheimer's Cases**

As of July 2009, there are over 50,000 persons in South Carolina who have Alzheimer's disease, based upon the Alzheimer's Disease Registry (the Registry has data only on those who have been diagnosed). By 2030, it is expected that 90,000 South Carolinians will have Alzheimer's disease. The average lifetime cost of care for an Alzheimer's patient is \$174,000. The cost to individuals, families, Medicare, Medicaid, insurance companies, and businesses would be \$15.7 billion. With a 3% inflation factor, the cost would double to \$31.4 billion.

As noted in the Lt. Governor's Purple Ribbon Task Force's 2009 Report, Alzheimer's is a terminal illness and the duration lasts from three to twenty years, with the average duration being eight years. It is projected that 24,453 of the 90,000 estimated persons with Alzheimer's disease and Related disorders would be in a Medicaid nursing home bed in 2030. The cost would be \$74,000 per person, or \$1.8 billion and \$543 million in state funds, assuming a 3% annual inflation rate.

**G. Work Force Shortages**

As the baby boomer workforce ages, South Carolina will face a growing shortage of workers in service-related fields including physicians, nurses, health care workers, teachers, and government workers. This shortage will create significant barriers to meeting the needs of seniors. The state's business community must create incentives to meet this shortage. As South Carolina's 1.2 million baby boomers retire, employers must plan to prevent loss of knowledge by transferring it to other staff through cross training so that their organizations can remain effective.

**H. Business Opportunities and Challenges**

The influx of affluent, in-migrating seniors has created a growing need for services, opportunities for creation of new businesses, and expansion of existing organizations. The in-migration of seniors create many outstanding job and economic development opportunities for South Carolina.

**1.5 How the Accountability Report is used to Improve Organizational Performance**

The report is distributed to all LGOA staff, the South Carolina Advisory Council on Aging members, and AAA directors. It is also placed on the agency's website for public viewing. It is a resource for communicating agency performance and achievements for Fiscal Year 2008-2009. It focuses on organizational assessment, performance improvement, and orientation of new staff. Externally, it is used to communicate agency performance to state and federal governments. This 2008-2009 Accountability Report is particularly critical for the members of the South Carolina General Assembly to see firsthand the work of the Office on Aging and its impact on not only South Carolina's senior citizens but the entire state during a period when budget resources are limited.

**SECTION II: ORGANIZATIONAL PROFILE****II.1 Main Products, Services and Primary Delivery Method**

Lt. Governor André Bauer is the chief advocate for seniors in South Carolina. The LGOA is designated as the State Unit on Aging (SUA), responsible for administration of all OAA funds and annual state appropriations. The LGOA focuses on program planning and advocacy for seniors in South Carolina. Key components are as follows:

- **Long Term Care Ombudsman** program (includes the Friendly Visitors Program and Senior Fraud and Scams initiatives)
- **Elder Rights:** Legal service development, elder abuse prevention, advanced directives
- **Aging Services:** Nutrition; transportation; home care; adult day care; health promotion and disease prevention programs; insurance counseling (including Medicare Part D); education and training; legal services; Family Caregiver Support, the Alzheimer's Resource Coordination Center (ARCC), and Information, Referral and Assistance (IR&A) services and emergency rental assistance.
- **Policy, Planning, and Reporting:** Activity Based Budget, Lt. Governor's Office Budget Request, State Accountability Report, federal NAPIS report, Performance Outcomes Measurement Project grant, Duke Endowment SC Seniors' Cube grant, Lt. Governor's Office on Aging Strategic Plan, SC Mature Adults Count Reports, and statewide and county data provided through the 2009 South Carolina Senior Counts Report.
- **Consumer Information and Caregiver Services:** Aging and Disability Resource Centers, and Systems Transformation



- **Public Information:** including disaster planning and preparedness
- **Administrative Services, Financial Management, and Information Technology:** *SC Access*, and the annual Summer School of Gerontology.

The LGOA is required by law to allocate funds to the ten AAAs who are responsible for data system accounting for regional planning, resource coordination, and assessment and oversight of a coordinated service delivery system. The AAAs competitively procure a wide range of home and community-based services delivered locally. Fifty-three (53) local service contractors provide a wide range of the above specified services to seniors throughout the state.

## **II.2 Key Customer Segments and Their Key Requirements/Expectations**

- All seniors in South Carolina, their families and caregivers: services for their needs and advocacy for their concerns
- The Lieutenant Governor: Lt. Governor Bauer insists on a cost effective administration, that provides quality care, consumer services and outstanding customer satisfaction.
- The General Assembly: cost effective administration to meet/address the needs and interests of seniors, their families, and taxpayers
- Area Agencies on Aging: provide regional services for caregivers and residents of LTC, oversight, guidance, and financial and advocacy support
- Residents of long term care facilities and their families (includes nursing facilities and residential care facilities): provide information, assistance, and protection
- Residents of DDSN and DMH facilities: information and assistance, and protection from abuse, neglect and exploitation in partnership with the State Law Enforcement Division
- Local service contractors: administrative oversight, guidance, and financial and advocacy support in partnership with the Area Agencies on Aging
- Communities: information and assistance and grants where appropriate and possible
- Providers of supplies and equipment: provide efficient reimbursement

## **II.3 Key Stakeholders**

- Seniors, their families and caregivers
- Federal, state, and local government agencies
- Communities and local Chambers of Commerce
- AARP
- Persons with disabilities and disability advocates
- Silver-Haired Legislature
- State agencies, colleges and universities
- Courts
- Providers of supplies and equipment
- Hospitals and long term care facilities

## **II-4 Key Suppliers and Partners**

- Seniors, their families, and caregivers
- Federal, state, and local government agencies
- Service providers
- Communities
- Advisory Boards
- Colleges and universities
- Information technology providers

## **II-5 Operation Location**

The Office of the Lt. Governor: the State House; the LGOA: 1301 Gervais St., Suite 200.

## **II-6 Number of Employees**

The Office of the Lt. Governor and the LGOA are currently authorized fifty-three (53) Full Time Equivalents (FTEs) and three (3) Temporary Grant Positions. Of these, forty-six (46) FTEs are classified and seven (7) are unclassified. (The LGOA currently has thirteen vacancies)

**II-7 Regulatory Environment Under Which the Agency Operates,**

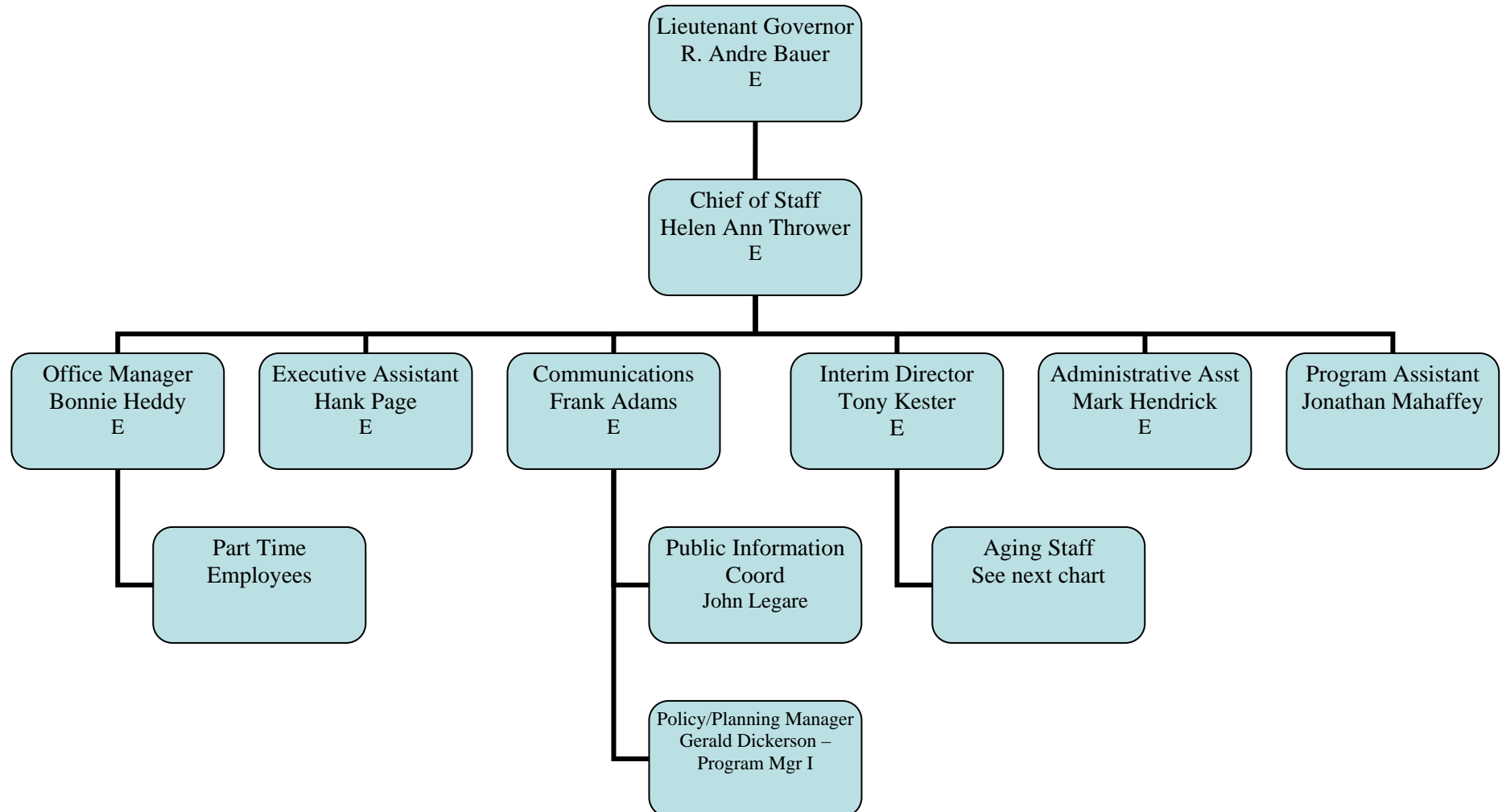
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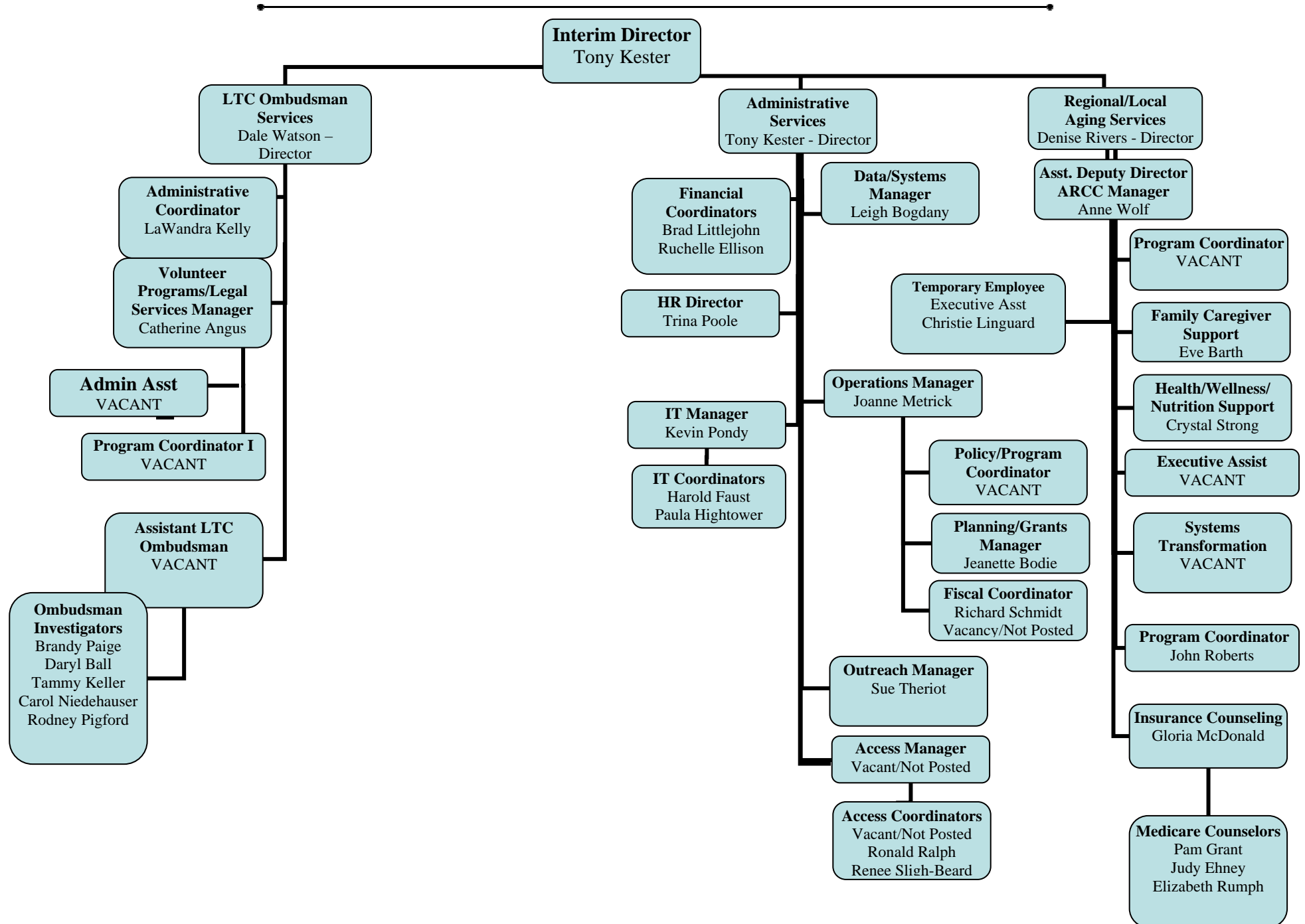
**II-8 Performance Improvement System**

Performance improvement starts with the individual's Employee Performance Management System (EPMS) through defined goals and objectives laid out in the strategic planning process. The agency constantly monitors progress through attainment of its mission, goals and objectives.

## II.9 Organization Charts

### Office of the Lt. Governor and the Lt. Governor's Office on Aging (LGOA)





**II.10 Expenditures/Appropriations Chart**

**Accountability Report Appropriations/Expenditures Chart**  
**Base Budget Expenditures and Appropriations**

Major Budget Categories	FY 07-08 Actual Expenditures		FY 08-09 Actual Expenditures		FY 09-10 Appropriations Act	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	\$2,427,884	\$1,498,200	\$2,262,061	\$1,390,859	\$2,271,957	\$1,175,896
Other Operating	\$1,058,288	\$446,248	\$1,388,577	\$323,794	\$1,179,102	\$267,053
Special Items	\$204,395	\$204,395	\$130,924	\$130,924	\$250,000	\$250,000
Permanent Improvements	\$0	\$0	\$0	\$0	\$0	\$0
Case Services	\$170,189	\$0	\$129,678	\$53	\$500,000	\$0
Distributions to Subdivisions	\$23,079,704	\$2,305,613	\$24,186,658	\$1,734,393	\$27,015,818	\$1,429,663
Fringe Benefits	\$655,090	\$404,564	\$642,928	\$396,539	\$665,953	\$348,688
Non-recurring	\$2,847,704	\$2,847,704	\$2,511,029	\$137,473	\$3,050,000	\$0
<b>Total</b>	<b>\$30,443,254</b>	<b>\$7,706,724</b>	<b>\$31,251,855</b>	<b>\$4,114,035</b>	<b>\$34,932,830</b>	<b>\$3,471,300</b>

**Other Expenditures**

Sources of Funds	FY 06-07 Actual Expenditures	FY 07-08 Actual Expenditures
Supplemental Bills		
Capital Reserve Funds		
Bonds		

- Key Cross-References link to Category 7 - Business Results by a Chart number that is included in the 7th section of this document.

**II.11 Major Program Areas**

<b>Program Number and Title</b>	<b>Major Program Area Purpose (Brief)</b>	<b>FY 07-08 Budget Expenditures</b>	<b>FY 08-09 Budget Expenditures</b>	<b>Key Cross References for Financial Results*</b>
I. Admin Lt. Governor	Serves as President of the Senate. Provides executive leadership and constituent service.	<b>State:</b> 262,512 <b>Federal:</b> <b>Other:</b> <b>Total:</b> 262,512 <b>% of Total Budget:</b> 1%	<b>State:</b> 368,417 <b>Federal:</b> <b>Other:</b> <b>Total:</b> 368,417 <b>% of Total Budget:</b> 1%	N/A
II.A Office on Aging Admin	Provides leadership, training, and coordination to promote services to seniors.	<b>State:</b> 1,681,936 <b>Federal:</b> 1,337,865 <b>Other:</b> 203,859 <b>Total:</b> 3,223,660 <b>% of Total Budget:</b> 11%	<b>State:</b> 1,346,263 <b>Federal:</b> 1,778,443 <b>Other:</b> 287,167 <b>Total:</b> 3,411,873 <b>% of Total Budget:</b> 11%	Figure III.7.1 through Figure III.7.1.5
II.B Aging Assistance	Provides funding for seniors in order to improve the quality and length of life.	<b>State:</b> 5,357,712 <b>Federal:</b> 19,247,461 <b>Other:</b> 1,696,819 <b>Total:</b> 26,301,952 <b>% of Total Budget:</b> 86%	<b>State:</b> 2,002,816 <b>Federal:</b> 20,247,098 <b>Other:</b> 4,578,723 <b>Total:</b> 26,828,637 <b>% of Total Budget:</b> 86%	Figure III.7.1.1 through Figure III.7.2.30
II.C Employer Contribution	Provides for Retirement, FICA, Workers Compensation, Health Insurance, and Unemployment Insurance for agency staff.	<b>State:</b> 404,564 <b>Federal:</b> 247,841 <b>Other:</b> 2,685 <b>Total:</b> 655,090 <b>% of Total Budget:</b> 2%	<b>State:</b> 396,539 <b>Federal:</b> 241,686 <b>Other:</b> 4,703 <b>Total:</b> 642,928 <b>% of Total Budget:</b> 2%	N/A

**Below: List any programs not included above and show the remainder of expenditures by source of funds.**

<b>Remainder of Expenditures:</b>	<b>State:</b> <b>Federal:</b> <b>Other:</b> <b>Total:</b> <b>% of Total Budget:</b>	<b>State:</b> <b>Federal:</b> <b>Other:</b> <b>Total:</b> <b>% of Total Budget:</b>
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### **SECTION III: ELEMENTS OF MALCOLM BALDRIDGE AWARD CRITERIA**

#### **III.1 Leadership**

As Lieutenant Governor, André Bauer is the Constitutional Officer responsible for the Office on Aging. Under his leadership, Lt. Governor Bauer is the chief advocate for senior citizens in South Carolina. The Lt. Governor's Helen Ann Siegling Thrower is the Chief of Staff for the Lieutenant Governor's Office. The Lt. Governor's Office is located on the first floor of the Statehouse and employs five full time staff members. The Lt. Governor's Office on Aging is located on the second floor of the Wilbur Smith Building and has positions for 43 fulltime employees, although there are currently thirteen vacancies. Tony Kester was named Interim Director in 2008 and continues to serve in that capacity, reporting to the Lt. Governor's Chief of Staff.

The senior leaders for the LGOA includes the deputy directors for Long Term Care Ombudsman, Aging Services, Administration, Public Information, and Policy and Planning Manager.

The agency's improvement efforts require strong leadership. The senior leaders continue to examine and evaluate all practices and procedures in all program areas to address the impact of internal and external factors. This is accomplished through ongoing attention to formal and informal feedback.

##### **III.1.1 How do senior leaders set, deploy, and ensure two-way communication for: a) short and long term organizational direction and organizational priorities, b) performance expectations, c) organizational values, and d) ethical behavior?**

Leaders set examples through performance. Communications between the Senior Leaders and Workforce is critical. The LGOA updates its Strategic Plan annually with its goals and objectives, and also sets specific expectations for achievement of organization goals and objectives through the Employee Performance Measurement System (EPMS). The LGOA Executive Management Team (EMT) meets weekly; general staff meetings and individual divisions meet monthly. Short and long-term priorities, information on agency initiatives, progress on meeting objectives and any causes of concern are addressed at each level. Position descriptions and EPMS planning stages for all staff focus on these issues.

##### **III.1.2 How do senior leaders establish and promote focus on customers and stakeholders?**

The LGOA actively promotes a focus on customers and stakeholders and has developed coalitions and partnerships with stakeholders to maximize customer focus. Input and involvement from multiple partnerships has broadened the outreach of the office. Active partnerships include:

- South Carolina Advisory Council on Aging appointed previously by the Governor, but now by the Lt. Governor
- Care Commission
- Coalition for Successful Aging formed to serve as an adjunct to the Care Commission
- ARCC Advisory Council appointed by the Governor
- The ElderCare Trust Fund Advisory Board
- Systems Transformation Grant Advisory Committee
- Silver Haired Legislature
- AAA Directors
- Local service contractors
- South Carolina Seniors' Cube Statewide Steering Committee
- AARP State Office
- Geriatric Loan Forgiveness Advisory Board
- Alzheimer's State Plan Task Force (Purple Ribbon Task Force)

### **III.1.3 How does the organization address the current/potential impact on the public of its products, programs, services, facilities and operations, including associated risks?**

The LGOA's Manual of Policies and Procedures for Aging Services incorporates policies, standards, and procedures required by the OAA, related federal regulations issued by the AoA and the US Department of Labor, and other applicable federal and state regulations. For example, it includes specific standards for food service delivery to ensure that all food served to seniors by service providers is safe and nutritious. It contains a detailed scope of work and quality assurance standards for all aging programs and services. Contractors are audited on these standards annually. Competitive procurement of services ensures that the LGOA obtains the highest quality, cost effective services available in an ongoing effort to procure services at the most reasonable price, to maximize services available to South Carolina's seniors and their caregivers.

### **III.1.4 How do senior leaders maintain fiscal, legal, and regulatory accountability?**

The OAA intends that the LGOA ensures accountability for federal funds. This is accomplished by the following:

- Developing and maintaining program policies, procedures, and standards
- Developing a formula for distributing funds to the regional programs
- Maintaining the confidentiality of program data and information at all levels
- Maintaining a statewide reporting system
- Preparing and distributing the annual Accountability Report
- Monitoring fiscal, legal, and regulatory requirements
- Monitoring all funding requests, conducting audits, and site visits

### **III.1.5 What performance measures do senior leaders regularly review to inform them on needed actions?**

#### **Aging Programs and Services**

- Number of persons using I/R&A, and Family Caregiver Support programs
- Number of new or expanded respite programs developed by ARCC grant seed money
- Number of persons served with respite or educational programs through ARCC grant sites
- Number of outreach and community education events
- Number (%) of consumers reporting satisfactory experiences with I/R&A services
- Number of persons served by OAA services
- Number of persons enrolled in evidence-based health prevention programs
- Number of persons participating in the Senior Employment Program (Title V)
- Number of seniors reached by medication management activities
- Number of quality assurance deficiencies found and number of deficiencies rectified
- Number of seniors receiving Medicare prescription drug program (Part D) information
- Number of senior center, ElderCare Trust, and ARCC grants funded
- Number of persons counseled annually by the I-CARE and Medicare fraud programs
- Number of seniors receiving home and community based services through Supplemental State Funds

#### **Long Term Care Ombudsman**

- Number of cases opened and closed by Long Term Care Ombudsmen
- Number of facility trainings and community education sessions conducted
- Number of consultations to facilities and individuals
- Number of friendly visits made to facilities

#### **Elder Rights**

- Monitor guardianship and conservatorship proceedings in Family Courts
- Monitor number of facilities and volunteers recruited and trained for the Friendly Visitors Program

#### **Planning and Education**

- Number of inquiries to the LGOA web site and the *Mature Adults Count* web site
- Number and dollar value of grants received to enhance research based decision making



### **Administration, Financial Management, and Information Technology**

- Number of persons using *SC Access*
- Number of persons receiving emergency rental assistance
- Number of persons receiving training and education services through the Summer School of Gerontology

#### **III.1.6 How do senior leaders use organizational performance review findings and employee feedback to improve their own leadership effectiveness and the effectiveness of management throughout the organization including the head of the organization, and the governance board/policy making body? How do their personal actions reflect a commitment to organization values?**

The LGOA actively practices preventative management by applying the B&C Board's *Human Resources for Supervisory Practices*. The Director ensures that each supervisor's EPMS is tied to the Strategic Plan and the B&C Board's Supervisory Program. Position descriptions and planning stages are updated as necessary to ensure that activities result in successful completion of goals and initiatives. This process continues to reflect employees' duties and responsibilities. Senior Leaders lead by example and by exhibiting a strong work ethic and their personal actions always reflect a commitment to the organization's values.

#### **III.1.7 How do senior leaders promote and personally participate in succession planning and the development of future organizational leaders?**

Senior leaders realize that the LGOA will be in a transition mode with senior employees retiring over the next five years and with the change in Lt. Governors in 2011. Leaders consider this during recruitment of new employees and their possibility for advancement. Senior leaders regularly consider the performance of middle level staff for promotion. Staff members are encouraged to take courses and attend meetings and conferences with the goal of increasing their knowledge and abilities for future leadership roles. Senior leaders are regularly involved in workforce planning and development of certified training programs, recommending staff to participate in the Certified Program Managers program, and Executive Management Institute with the State Budget and Control Board. Additionally, staff are cross-trained in order that an organization as small as the Office of the Lt. Governor can meet the demands of its constituents and meet its mission and goals.

#### **III.1.8 How do senior leaders create an environment for performance improvement, accomplishment of strategic objectives, and innovation?**

Leaders set examples through performance. The LGOA updates its Strategic Plan annually with its goals and objectives, and also sets specific expectations for achievement of organization goals and objectives through the Employee Performance Measurement System (EPMS).

#### **III.1.9 How do senior leaders create an environment for organizational and workforce learning?**

Senior leaders set examples through actions and management performance. Leaders work closely with staff in the office and in the field to encourage organizational and workforce learning. Through example, the leaders ensure an environment that is conducive to efficient workforce learning.

#### **III.1.10 How do senior leaders communicate with, engage, empower, and motivate the entire workforce throughout the organization? How do senior leaders take an active role in reward and recognition processes to reinforce high performance throughout the organization?**

Senior leaders are expected to actively engage and communicate with the workforce and motivate through example and their leadership knowledge. The LGOA Senior Leaders or Executive Management Team (EMT) meets weekly so there is a constant flow of information and all leaders are kept informed. Leaders provide the workforce information, as well as ongoing presentations on senior issues and agency activities. Staff is encouraged to participate and engage leaders at the monthly staff meetings and weekly division meetings. Several times each year staff is recognized for accomplishments during staff appreciation events. Finally, the Director and division leaders all have open door policies and encourage staff to meet with them.

#### **III. 1.11 How do senior leaders actively support and strengthen the communities in which your organization operates? Include how senior leaders determine areas of emphasis for**

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**organizational involvement and support, and how senior leaders, the workforce, and the organization contribute to improving these communities.**

Leadership actively supports and strengthens the communities throughout South Carolina by creating partnerships with the Area Agencies on Aging, local service contractors, business groups and the faith based community. Leaders and workforce provide information, ongoing presentations on senior issues, and financial resources to improve the lives of seniors and their families throughout South Carolina. Leaders and workforce participate on numerous boards.

### **III.2 Strategic Planning**

The strategic planning process is based on the *Planning and Managing for Results* model, an outcomes-based process focusing on agency goals. Senior staff developed the current plan. It was subsequently reviewed by all staff. Each area was charged to develop operational plans with strategies, activities and outcomes related to agency goals. The strategic plan is revised annually.

The LGOA uses analysis of data from its information systems to ascertain basic customer needs. LGOA has a history of active involvement with consumers, caregivers, private providers, community leaders, special interest groups, and the public in the formation of goals and objectives.

**STRATEGIC PLANNING CHART**

<b>Program Number and Title</b>	<b>Supported Agency Strategic Planning Goal/Objective</b>	<b>Related FY 08-09 Key Agency Action Plan/Initiative(s)</b>	<b>Key Cross References for Performance Measures*</b>
I. Admin Lt. Governor	Fulfill the constitutional duties of the office of Lieutenant Governor.	Preside over the Senate. Provide leadership to the Office on Aging. Respond to constituent needs. Respond to other needs as appropriate.	N/A
II.A Office On Aging Admin	Effectively and efficiently manage and distribute Older Americans Act and State resources to provide services.	Plan, allocate, and advocate for all Older Americans Act and State resources. Establish and maintain full administrative functions and activities to support the LGOA.	Figure III.7.2.1 through Figure III.7.2.6
II.B Aging Assistance	Improve the quality and length of healthy life for South Carolina's senior population.	Promote opportunities for seniors and their families to exercise more control over the services they receive. Provide programs, education and information to help older South Carolinians prevent or delay the onset of chronic conditions and maintain independence and quality of life	Figure III.7.1.1 through Figure III.7.1.34
II.C Employer Contribution	Establish and maintain full administrative functions and activities to support the LGOA.	State Employer Contributions for health, dental, and unemployment insurance, workers compensation, social security, and retirement.	N/A

\* Key Cross-References are a link to the Category 7 - Business Results. These References provide a Chart number that is included in the 7th section of this document.

### **III.2.1 What is your Strategic Planning process, including key participants, key process steps, and how it addresses:**

#### **(A) Your organization's strengths, weaknesses, opportunities, and threats:**

The LGOA's strategic planning process annually assesses key goals and objectives compatible with the mission and values of the organization. The Strategic Plan reviews strengths, weaknesses, opportunities, and threats on an annual basis. Leadership reviews critical areas where major objectives must be met for the next year through the action plan. During June through August major accomplishments are reviewed and the Strategic Plan is updated prior to the development of the budget request in August and September. The above factors are reviewed based upon comprehensive information gained internally and externally from numerous advisory bodies, other senior advocacy organizations such as the AARP, the Silver Haired Legislature, the General Assembly, and other stakeholder organizations.

#### **(B) Financial, regulatory, societal and other potential risks**

Fiscal accountability is accomplished by adherence to state and federal laws and regulations. The EMT maintains fiscal, legal, and regulatory accountability through active involvement in the day-to-

day operations of the agency. In addition to established audit schedules, both EMT members and program managers review reports and interview staff to determine that goals and initiatives are on target and are in compliance with laws and regulations. Oversight from the legislature and the state budget office is provided as the agency's budget is developed.

**(C) Shifts in technology or the regulatory environment**

The LGOA's Strategic Planning process takes into account shifts in technology and the regulatory environment as required. Technology and regulatory changes are addressed immediately in order that the organization meets efficient operational standards and regulatory and legal requirements.

**(D) Workforce capabilities and needs**

Executive staff and division leaders constantly assess workforce capabilities and needs. The Director monitors the agency's resources and needs to ensure that staff has the tools necessary to achieve the agency's goals and objectives, as well as monitoring success criteria for individual staff members.

**(E) Organizational continuity in emergencies**

The LGOA has a strong organization in place and leaders and workforce fully understand the agency's emergency plan. In the event of a natural disaster or mass casualty, it follows the organization's Disaster Plan that ensures clear accountability and communication. In the event of key leadership being away during an emergency, executive staff meets weekly to keep the agency on target during the emergency. The regional AoA office has recognized the LGOA's Disaster Plan as a model.

**(F) Ability to execute the Strategic Plan**

The LGOA considers execution of the Plan to be based upon available human and financial resources. The process is future-oriented and constantly changes to meet ongoing expectations of its key customers, stakeholders, suppliers and partners.

**III.2.2 How do your strategic objectives address the strategic challenges you identified in your Executive Summary? (Section 1, Question 4.)**

The LGOA's strategic challenges addressed in Section 1, Question 4 play an important role in addressing the agency's strategic objectives. Strategic objectives and action plans are a direct result of the LGOA's overall Strategic Plan and are derived from its Mission and Strategic Goals. Each year overall needs are evaluated based upon many information sources (including the strategic challenges in the Accountability Report); objectives and action plans are developed within available resources. New objectives drive development of the budget. Based upon available resources and highest priority needs, the LGOA allocates resources to those objectives and action plans. The strategic challenges of the agency include senior staff retirement and workforce planning, limited resources and an ever growing population in need of services, health care needs of the aging population, the large and growing number of family caregivers, critical transportation needs, increasing number of Alzheimer's cases, work force shortages as baby boomers retire, and new business opportunities as the population grows older. All of these challenges were important considerations in developing the list of the strategic objectives below.

**GOAL 1: IMPROVE PROTECTIONS FOR SOUTH CAROLINA'S VULNERABLE ADULTS**

**Strategic Goal 1: Administer the Long Term Care Ombudsman Program as mandated under the Older Americans Act and South Carolina statutes to protect the rights of residents in long-term care facilities.**

**Strategic Objectives:**

1. Protected seniors from fraud and scams through educational programs.
2. Identified, investigated and resolved complaints made by or on behalf of residents in LTC facilities.
3. Friendly Visitors Program is active in all ten regions of the state.
4. Educated the community about the LTC needs; provided training for facility staff and councils.
5. The ombudsman reporting system meets the requirements of the Administration on Aging.
6. Assisted Resident and Family Councils.

**Strategic Goal 2: Develop programs for prevention of elder abuse, neglect and exploitation.****Strategic Objectives:**

1. Provided series of listening sessions throughout South Carolina on fraud and abuse.
2. Provided public education to prevent elder abuse, neglect and exploitation.
3. Participated in coordination of services instituted under the State Omnibus Adult Protection Act.
4. Published information to quantify the extent of elder abuse, neglect and exploitation in the state.
5. Conducted training for facility staff and resident and family councils in the prevention and treatment of elder abuse, neglect and exploitation.

**Strategic Goal 3: Provide Elder Rights and Legal Assistance Programs for the elderly**

1. Provided education and training on elder rights and legal assistance to older individuals.
2. Increased awareness of advance health directives including the *Five Wishes* document through training and education.
3. Developed and implemented public awareness campaign regarding schemes, fraud and scams.

**GOAL 2: IMPROVE THE QUALITY OF LIFE AND LENGTH OF HEALTHY LIFE FOR SOUTH CAROLINA'S SENIOR POPULATION****Strategic Goal 1: Promote opportunities for seniors and their families to exercise more control over and access to services they receive****Strategic Objectives:**

1. Provided programs, education and information to protect seniors from fraud and scams
2. Continued to enhance the activities and operations of ADRCs.
3. Worked with ADRC's to continue providing training on planning for long term needs.
4. Continued adding resources for the mental retardation/developmental disabilities population and for traumatic brain injuries to the SC Access database.
5. Updated SC Access database for key areas which serve seniors.
6. Conducted trainings each year to increase the number of nationally certified Information & Referral specialists in the state.
7. Increased SC Access utilization through public information & trainings throughout the state targeting older adults, persons with disabilities and caregivers. SCACCESS staff attended numerous workshops and conferences to promote SCACCESS.
8. Worked with the Adult Protection Coordinating Council and other partners to develop state-specific information for the Learn About module in SC Access.
9. Continued working with the Lower Savannah ADRC in developing the mobility center.
10. Worked with AssistGuide software in the development of new electronic application forms (eforms), such as Aged, Blind, and Disabled (ABD) and market the existing Medicaid and GAPS eforms.
11. Continued to enhance development for integration of data systems by building bridges between systems and purchased software with existing aging programs.
12. Provided training/technical assistance meetings annually for the Regional Information, Referral and Assistance Specialists so they may maintain their Certification in Information and Referral and provide the most accurate information available.
13. Continued serving the needs of South Carolina's senior population by utilizing \$2.9 million in supplemental state funds for home and community based services for seniors. (Funds for Fiscal Year 2009 – 2010 were authorized for senior meals only and not all home and community based services as in the past.)
14. Coordinated the Purple Ribbon Alzheimer's Task Force and finalized a new State Plan for Alzheimer's services in South Carolina. A report with recommendations was provided to the General Assembly.

**Strategic Goal 2: Provide programs, education and information that will help older South Carolinians prevent or delay the onset of chronic conditions, maintain independence and quality of life**

**Strategic Objectives:**

1. Provided seniors with health and wellness information and opportunities to participate in activities and programs that promote and encourage physical activity.
2. Continued the Stanford University evidence-based health promotion program (EBHP) for chronic disease self management (Living Well South Carolina program) throughout the state.
3. Continued developing an incentive program for the expansion of EBHP programs statewide.
4. Maintained EBHP website link to statewide classes.
5. The LGOA Annual Statehouse walk was incorporated into numerous mall walks around the state, and the Lt. Governor's health and heart initiatives.
6. Provided information on medication management, compliance with physician's orders and medication assistance programs to obtain prescription drugs.
7. Assured the provision of nutritional meals and related services to prevent or delay institutionalization.

**Strategic Goal 3: Provide Medicare and Medicaid health care insurance and fraud information to seniors.**

**Strategic Objectives:**

1. Provided current information on Medicare, Medicaid and long-term care insurance.
2. Provided training on identification of Medicare and Medicaid fraud and report suspected fraud to the Centers for Medicare and Medicaid Services.
3. Provided information and assistance with Medicare Part-D during open enrollment periods in Fiscal Year 2008-2009.
4. Provided current information and counseling on Medicare Part-D and Medicare (Part C) Advantage Plans.
5. Assisted with completion and submission of Low Income Subsidy (LIS) and Medicare Savings Program applications.
6. Planned, developed and hosted outreach events to provide assistance with Medicare issues.

**Strategic Goal 4: Promote development and utilization of senior centers to provide information and services to encourage socialization, health and education.**

**Strategic Objectives:**

1. Required that Area Agencies on Aging ensure that senior centers promote physical activity, good nutrition, general health and wellness and assure increased utilization of senior center services. LGOA staff monitors and visits senior centers to ensure that activities meet the standards of the LGOA and federal guidelines.
2. Funded construction, expansion and renovation of three senior centers.

**Strategic Goal 5: Support the protection of vulnerable seniors in times of disaster.**

**Strategic Objectives:**

1. Maintained an operational disaster plan in partnership with local entities.
2. Provided leadership and actively participate in the Emergency Operations Center (EOC).
3. Coordinated and deliver services to support seniors impacted by a disaster.

**Strategic Goal 6: Provide information on Alzheimer's disease and related dementias, and seed grants to community organizations to develop educational and respite programs.**

**Strategic Objectives:**

1. Provided training opportunities for caregivers and professionals who care for persons with dementia.

2. Targeted underserved communities to expand respite services.
3. Provided seed grants to grantees by July 2009.
4. Continued services initiated under AoA Alzheimer's Demonstration Grant to States grant to support and expand services to persons with ADRD and their caregivers.
5. Coordinated "Purple Ribbon Alzheimer's Task Force" which was enacted through Concurrent Resolution in 2008. Task Force recommended a new State Plan and a final report was provided to the General Assembly.

**Strategic Goal 7: Partner with the Area Agencies on Aging to deliver information, assistance, training, respite and other support services to family members.**

**Strategic Objectives:**

1. Continued development of a flexible, consumer-driven statewide service delivery system by providing regional Family Caregiver Advocates with at least six (6) technical assistance/training meetings per year.
2. Maintained caregiver resources and continue posts on SC Access or agency website.
3. Caregiver Research Committee continued to explore potential grant opportunities to demonstrate the benefit of the Family Caregiver Support Program.

**Strategic Goal 8: Provide emergency rental assistance to eligible seniors.**

**Strategic Objectives:**

1. Distributed funds in accordance with program guidelines to enable eligible seniors to remain in their homes and prevent homelessness.

**GOAL 3: EFFECTIVELY AND EFFICIENTLY MANAGE AND DISTRIBUTE OLDER AMERICANS ACT AND STATE RESOURCES TO PROVIDE STATUTORILY MANDATED SERVICES**

**Strategic Goal 1: Maintain and support a competitive procurement process for services funded by AoA and the LGOA.**

**Strategic Objectives:**

1. Continued the operation of the Senior Community Service Employment Program (SCSEP) statewide.
2. Worked with AAA/COG directors on planning projects.
3. Ensured that Area Agencies on Aging negotiate contract renewals with existing contractors with satisfactory performance. Worked with AAA's on Area Plans and Competitive Procurement.

**Strategic Goal 2: Request, plan, and allocate all OAA and State resources.**

**Strategic Objectives:**

1. Completed the Area Plan process with the AAAs.
2. Submitted and supported the LGOA activity-based budget by August 2008.
3. Submitted the detailed budget request by August 2008.

**Strategic Goal 3: Provide administrative support to include accounting, budgeting, and payroll and information technology to the LGOA.**

**Strategic Objectives:**

1. Prepared and submitted required Federal program and fiscal reports by the due dates established by the various agencies.
2. Maintained a computer network for employees and constituents which allows for communication and exchange of resources both internal and external to the Lt. Governor's Office on Aging.
3. Provided employees with updates to the hardware and software to maximize efficiency and productivity.

**Strategic Goal 4: Monitor sub-grantees to ensure compliance with federal and state requirements.**

**Strategic Objectives:**

1. Continued to site monitor grant recipients for programmatic and fiscal compliance.
2. Ensured that all reporting requirements are met by grant recipients.
3. Provided regular technical support and training to grant recipients to promote the use of best practices.
4. Continued monitoring Supplemental State Funding Plan for home and community based services.

**GOAL 4: PROVIDE INFORMATION, RESEARCH, AND DATA ON TRENDS AND ISSUES THAT IMPACT THE QUALITY OF LIFE OF OLDER SOUTH CAROLINIANS****Strategic Goal 1: Increase awareness of aging issues and encourage consensus and support for aging policy changes.****Strategic Objectives:**

1. Provided timely updates of events and news for dissemination to the South Carolina Senior Community through an electronic mailing list.
2. Provided periodic updates to Local Aging Services Contractors.
3. Provided pertinent and timely information to the public about aging-related issues, programs and activities of the LGOA.

**Strategic Goal 2: Provide ongoing training and educational activities to improve the quality of life for seniors.****Strategic Objectives:**

1. Summer School 2009 was canceled due to budget cuts.
2. Provided annual comprehensive overview of aging services in South Carolina.

**Strategic Goal 3: Maintain and enhance research and data collection efforts on the status of seniors and on the effectiveness of services.****Strategic Objectives:**

1. Identified emergent national and state issues that improve the quality of life for our senior population.
2. Continued providing data to the Office of Research Services (ORS) to maintain the SC Seniors' Cube for research purposes.

**Strategic Goal 4: Meet federal and state reporting requirements on a timely basis.****Strategic Objectives:**

1. Completed annual National Aging Program Information System (NAPIS) report for OAA programs in Fiscal Year 2008-2009.
2. Completed other required annual OAA reports.
3. Completed the Annual Accountability Report by September 15, 2008.

**III.2.3 How do you develop and track action plans that address your key strategic objectives, and how do you allocate resources to ensure accomplishment of your action plans?**

Program staff is involved in developing an annual work plan incorporating action plans for their program areas. Each division has a detailed action plan that is built into the EPMS planning document for individual staff members. Progress toward outcomes and goals is evaluated through the EPMS process. Executive management monitors progress and revises plans as necessary based on changing needs and available resources.

**III.2.4 How do you communicate and deploy your strategic objectives, action plans and related performance measures?**

The Strategic Plan determines action plans as well as staff position descriptions and EPMS Planning Stages. All employees are made aware of operational plans, and progress on success criteria is discussed routinely at all levels. The LGOA considers many factors in developing its Strategic Plan: organizational challenges and present and future needs are considered as it develops the Activity Based Budget, the



Annual Budget Request, and the State Accountability Report. All of these are closely correlated with the Strategic Plan.

### **III.2.5 How do you measure progress on your action plans?**

Leadership monitors progress regularly through review of the Strategic Plan and all action plans. Specific actions are targeted by timetables and by steps that can be measured. These action plans are incorporated into the organizational areas and individual EPMS documents. The process is reviewed annually by Executive Management and steps are taken to improve the process as necessary.

### **III.2.6 How do you evaluate and improve your strategic planning process?**

The LGOA is proactive with senior leaders and staff evaluating and working together to improve the strategic planning process. Key objectives and action plans are deployed in the Strategic Plan and action steps are included in individual EPMS forms. The Strategic Plan is communicated by sharing it with stakeholders and partners, by including it on the agency website, and by sharing it with agency staff. The strategic plan is constantly evaluated and monitored by senior staff. Additional evaluation and improvement functions are performed by the individual divisions in consultation with senior staff and the Director. These include:

#### **Administration, Financial Management and Information Technology**

*SC Access Staff:*

- Expanded information for Traumatic Brain Injury and homecare service options, under grant funding from DHEC and DHHS;
- Continued adding South Carolina specific information to the *Learn About* feature in the areas of Traumatic Brain Injury, Elder Abuse issues, disabilities, transportation and work place issues.
- Continued to collaborate with other agencies such as the Adult Protection Coordinating Council, DHHS, United Way 211 and DHEC to pool resources and add information; and
- Promote and refined the remote entry process to increase use by organizations interested in updating their own data contained in the resource database.

*The Systems Transformation Grant:*

- Expanded SC Access and Learn About topics for expanded target populations;
- Promoted the personal care worker registry;
- Developed additional e-forms to streamline multiple eligibility processes.

#### **Information Technology**

- Continue building bridges between existing data systems within the LGOA and *SC Access* to reduce or eliminate duplicate data entry.

#### **Policy and Planning**

- Supervised a \$60,000 AoA grant for the third year of the Advanced Performance Outcomes Measurement Project to address potential cost savings from use of OAA funded home and community-based programs to avoid more costly acute care and institutional services;
- Worked with the USC School of Public Health and the State Budget and Control Board's Office of Research and Statistics;
- Monitored and provided planning for the \$2.9 million in supplemental funds for home and community based services, and
- Completed the Activity-Based Budget and the LGOA budget request by August 2008.
- Monitored ongoing Senior Center Permanent Improvement Projects and announced three new PIP grants in June 2009.

#### **Aging Services**

- Continued to update the agency's Manual of Policies and Procedures, including updating the scope of work outlines and quality assurance standards for all programs
- Provided insurance counseling and Medicare Fraud Control education statewide
- Participated in the Agency for Healthcare Research and Quality Learning Network to develop, implement, and expand evidence-based prevention programs for seniors

#### **Long Term Care Ombudsman Program**

- Friendly Visitors program is operating in all regions;

- Identified, investigated, and resolved complaints that are made by or on behalf of residents in nursing homes and residential care facilities;
- Developed statewide standards for the delivery of legal assistance for older individuals, and
- Provided education and training on Advance Health Care Directives to community groups and individuals requesting information.

**III.2.7 If the Agency's strategic plan is available to the public through the agency's internet homepage, please provide a website address for that plan.**

<http://www.aging.sc.gov/NR/rdonlyres/C4F29F3F-9691-4AD9-B7A9-C9970F65A5B4/0/OoAAccountabilityReportFY0708.pdf>

**III.3 Customer and Market Focus**

**III.3.1 How do you determine who your customers are and what their key requirements are?**

The OAA intends that the SUA shall be the leader relative to all aging issues on behalf of all older persons in the state age 60 and above. This means that the LGOA must proactively carry out a wide range of functions, including advocacy, interagency linkages, monitoring and evaluation, information and referral, LTC ombudsman, information sharing, planning, and coordination.

These functions are designed to facilitate the development or enhancement of comprehensive and coordinated community based systems serving communities throughout the state. These systems shall be designed to assist older persons in leading independent, meaningful, and dignified lives in their own homes and communities as long as possible.

Target groups under the OAA: Those eligible individuals identified by the AoA are as follows:

- in greatest economic need;
- in greatest social need;
- considered minorities; and/or
- residing in rural areas.

Every state must create a statewide Long Term Care Ombudsman Program (LTCOP). The primary role of the program is to advocate for the rights and interests of residents of long-term care facilities, and to identify, investigate, and resolve "complaints made by or on behalf of residents."

The definition of "resident" is "an older individual who resides in a long-term care facility." (OAA Section 711(6)). The term "long-term care facility" means any skilled nursing facility and residential care facility licensed by the state regulatory agency. Long-standing AoA policy is that ombudsmen may serve disabled individuals under the age of 60 who are living in LTC facilities, if such service does not weaken or decrease service to older individuals covered under the Act. These mandated responsibilities in large part dictate the customers as listed in Section II.3.

**III.3.2 How do you keep your listening and learning methods current with changing customer/business needs and expectations?**

The LGOA uses many mechanisms and resources to identify the needs of seniors. Information gathered aids state, regional and local agencies in planning for services to meet the needs of seniors.

The LGOA staff analyzes data from *SC Access* searches on the website and requests for referral to services through IR&A Specialists, Caregiver Support Specialists, and calls coming to the LGOA front desk. AAAs conduct needs assessments and prepare regional plans that are updated annually. Demographic data from the ORS is analyzed to refine the focus on target populations. Information collected on waiting lists for services from local aging service providers is used to direct service dollars. Input from Advisory Committees, the Silver Haired Legislature and a variety of advocacy groups keep the agency's focus on client needs and expectations.

The National Ombudsman Resource Center, located in Washington, DC, provides ongoing support, technical assistance and training material to 53 State Long Term Care Ombudsman Programs and their networks of almost 600 regional programs. The Center's objectives are to enhance the skills, knowledge and management capacity of State programs to enable them to handle residents' complaints and represent resident interests. The State Long Term Care Ombudsman, in turn, conducts monthly training meetings

with regional ombudsmen, and conducts an annual certification, re-certification training class for all new and current ombudsmen.

Views of older persons are considered by the LGOA in the development and administration of the aging programs and services. Input is obtained through such means as the following:

- public hearings
- review by advisory committees or other groups of older people
- surveys
- publication of the draft plan and solicitation of written comments

Annually, AAAs conduct needs assessments in preparation for compiling Area Plans. Additionally, the South Carolina State Plan for Aging for 2009-2011 incorporated detailed findings and recommendations from the USC College of Social Work, the Sage Institute, POMP survey results, public forums, and legislative priorities from AARP and the Silver Haired Legislature.

- **III.3.3 What are your key customer access mechanisms, and how do these access mechanisms enable customers to seek information, conduct business, and make complaints?** The primary customer access mechanism for the LGO is staff access and accessibility through interactions with seniors, families, caregivers, senior and aging network members, health care professionals and non-profit organizations. In addition, the LGO was recognized by the South Carolina State Library with the “Notable State Document Award” for Agency Web Site Design. This award recognizes the Lt. Governor’s efforts to provide easy access for senior information, data, and senior services in South Carolina. In addition, the web site also provides news important to the aging network and senior citizens seeking critical services from the state. The site also provides the Aging News Service which compiles news and information of interest to South Carolina’s aging community. The web site also includes SC ACCESS, a web based directory designed to help older South Carolinians, disabled adults, and others who need long-term care supports locate the services available in their local communities. ([www.aging.sc.gov](http://www.aging.sc.gov)). The LGO has a section on its web page that allows for complaints and questions, and it has a toll free number that is answered during working hours.

#### **III.3.4 How do you measure customer/stakeholder satisfaction and dissatisfaction, and use this information to improve?**

The Lt. Governor’s Office and the LGOA measure customer/stakeholder satisfaction and dissatisfaction through various ways. The LGOA conducts periodic surveys of clients, holds and attends public hearings, and meets with key advisory committees throughout the year. Input is received from key policymakers such as the Lt. Governor, members of the General Assembly, the AoA, the CMS, granting organizations, seniors, and the many senior service delivery and advocacy organizations. Both positive and negative input is received on a regular basis and senior management meets on a regular basis with advisory groups to improve efficiency/effectiveness of programs and services, and to develop appropriate initiatives to meet the needs and challenges that face the Lt. Governor’s Office and the LGOA.

**III.3.5 How do you use information from customers/stakeholders to keep services or programs relevant and provide for continuous improvement?** Data from *SC Access* web site searches are analyzed, as well as requests for referral to services through IR&A Specialists, and calls coming to the LGOA front desk. AAAs conduct needs assessments and prepare regional plans for services needed. Waiting list information from local aging service contractors is also used to formulate changes to service provision and delivery.

The Ombudsman Program from the outset has recorded and reported data. These data were designed primarily to track patterns and trends within the facilities ombudsmen monitor and are primarily tools for advocacy for change and for describing and measuring program inputs, processes, and output. Outcomes measurement is also tied to the accomplishment of the most important performance measure of the program: protecting residents’ health, safety, and rights.

Quality Assurance surveys and Quality Assurance program reviews ensure that programs meet the needs of seniors while providing services and activities that meet a certain standard.

### **III.3.6 How do you build positive relationships with customers and stakeholders to meet and exceed their expectations? Indicate any key distinctions between different customer groups.**

The Lt. Governor's Office and the LGOA build positive relationships through customer service and continuous involvement and communication with customers and stakeholders. The LGOA meets on a regular basis with advocacy groups, service delivery organizations, the State AARP, the Silver Haired Legislature, advisory bodies, staff of the general assembly, and associated groups to address its key goals and objectives. The LGOA strives to provide cost effective administration and services to seniors, their families and other taxpayers while addressing their needs within available resources. The LGOA monitors needs, expectations and results in order to continuously improve its administration, service delivery statewide and obtaining results meaningful to its customers and stakeholders who are the same individuals and groups.

## **III.4 Measurement, Analysis, and Knowledge Management**

### **III.4.1 How do you decide which operations, processes, and systems to measure for tracking financial and operational performance, including progress relative to strategic objectives and action plans?**

The Strategic Plan process determines measures of key performance and aligns them with desired outcomes. Outcome measurements, processes, and systems support the LGOA's mission, strategic goals, and objectives. Strategic objectives and action plans are updated on an ongoing basis.

### **III.4.2 How do you select, collect, align, and integrate data/information for analysis to provide effective support for decision making throughout your organization?**

Data collection and analysis is the first step in strategic planning. Individuals responsible for decision-making are provided with support to assist them. Information gathered in analyzing performance is useful in spotlighting strengths and weaknesses and is used to update the plan. The LGOA divisions use reports to spot trends, project future needs, and address federal requirements. Customer satisfaction surveys are carefully evaluated and used in the consideration of improvements or new services.

The LGOA, in conjunction with the Office of Research and Statistics, has enhanced research-based decision making through the POMP grants and the award of The Duke Endowment grants for the preparation of an interactive web-based seniors' cube (data warehouse) to allow research and analysis of senior issues and programs.

### **III.4.3 What are your key measures, how do you review them, and how do you keep them current with organizational service needs and directions.**

Key Measures are constantly reviewed by Senior Leaders and Workforce to ensure they are current, and meet the LGOA service needs.

- Aging Environment in South Carolina - key demographics
- Characteristics of Aging Clients Based on Assessment for Services
- Funding and Clients Served
- Family Caregiver Support Program and Alzheimer's Resource Coordination Program
- Information and Referral Services
- Ombudsman Program
- Medicare Part D
- Federal and State Funding and Comparative Statistics

### **III.4.4 How do you select and use key comparative data and information to support operational and strategic decision making and innovation?**

Comparative data is used to assess the effectiveness of aging programs and services as mandated by the OAA. The LGOA also uses comparative data to monitor and address national and regional trends, and to consider improvements in service delivery.

To promote research-based decision-making, the LGOA is leading the development of an integrated data model to select and use comparative data from numerous state and private data sources. Funded by a grant from the Duke Endowment, this project is conducted in partnership with USC Arnold School of Public

Health, MUSC, Clemson University, Budget and Control Board Office of Research and Statistics, and AARP.

#### **III.4.5 How do you ensure data integrity, reliability, timeliness, accuracy, security, and availability for decision-making?**

The LGOA provides the latest operating system and hardware so that the most recent, fully featured, and secure applications will run quickly and be less likely to diminish data integrity. Downtime is greatly reduced as is the cost to manage systems. The LGOA is also moving to web based applications for access any time from anywhere. Data controls and backups have been centralized. Data resides on a secure server, and reports can be done on up-to-the-minute data.

The LGOA provides information via its web site: online documents are easily searchable, and can be downloaded as needed; data is available to everyone quickly, and can be accessed at any time from a browser; and an IT professional is always available during business hours to address problems immediately and take proactive measures to keep machines running properly and safely. The LGOA works with software contractors, internal staff and service providers to improve timeliness and accuracy of data for our information systems.

#### **III.4.6 How do you translate organizational performance review findings into priorities for continuous improvement?**

Performance review findings are translated into priorities for continuous improvement through a number of activities: updating of the strategic plan, incorporating the revised goals and objectives into the various organizational action plans, and incorporating them into staff EPMS process. Findings are also reviewed with key advisory bodies and advocacy partners for inclusion in the budget process. Obtaining needed resources is critical to attainment of long term goals and objectives. With the growth of the senior population, key initiatives must be updated as the environment requires so that continuous improvement can occur.

#### **III.4.7 How do you collect, transfer and maintain organizational and Workforce knowledge? How do you identify, share and implement best practices?**

The LGOA reorganization process was accomplished to promote the sharing of information and the transfer of knowledge. The *Policies and Procedures Manual for Aging Programs and Services* under the OAA is available on the agency's website.

The LGOA has established a process of cross-training and leadership development to create a seamless transition of leadership as many senior staff members retire over the next several years. The LGOA shares data collected through processes noted in III.4.4 and 4.5.

The LGOA identifies best practices through ongoing research, collaboration with its customers, stakeholders, and partners, as well as through attendance at state, regional, and national conferences. Results of findings are shared with staff and the above parties.

The LGOA shares and implements these best practices by holding staff meetings, and workforce directly interacting with Senior Leaders.

### **III.5 Workforce Focus**

#### **III.5.1 How does management organize and measure work to enable your workforce to: 1) develop to their full potential, aligned with the organization's objectives, strategies, and action plans; and 2) promote cooperation, initiative, empowerment, teamwork, innovation, and your organization's culture?**

LGOA employees understand how their positions support the agency's mission, values, and strategic objectives and are involved in setting achievable goals and success criteria. Staff members are recognized in monthly staff meetings for accomplishments and by individual supervisors on a routine basis. A staff appreciation luncheon is held annually to recognize staff accomplishments. Senior leaders work with staff to foster and promote cooperation, initiative, empowerment and teamwork.

#### **III.5.2 How do you achieve effective communication and knowledge/skill/best practice sharing across departments, jobs, and locations?**

Employees of the LGOA are encouraged to communicate and share skills/best practices with supervisors and senior management. Each Division Deputy Director has a clear understanding of their part of the

agency success and deputies share this information and knowledge with their staff. The Interim Director has an open door policy and encourages dialogue with staff.

**III.5.3 How does management recruit, hire, place, and retain new employees? Describe any barriers that you may encounter?**

With the current economic climate and the LGOA having 13 unfilled positions this activity was not an issue in Fiscal Year 2008-2009. However, when vacancies are filled, the LGOA usually recruits internally when possible and advertises at area colleges and universities, and notifies of vacancies through the State Human Resources Office. Interns are actively recruited from area colleges and universities to be identified as potential applicants in the future.

**III.5.4 How do you assess your workforce capability and capacity needs, including skills, competencies, and staffing levels?**

Human Resources constantly monitors its workforce related processes through meetings with supervisors and individual staff. Trends are monitored and processes are modified as necessary to make improvements. Division leaders monitor staffing capabilities and needs, and discuss the needs with the Director.

**III.5.5 How does your workforce performance management system, including feedback to and from employees, support high performance and contribute to the achievement of your action plans?**

The proper use of both the position description and the EPMS allows the employee and supervisor to agree upon measurable goals for each individual. The documents can be easily modified when new duties are added, old duties are removed, or current duties need changing.

**III.5.6 How does your development and learning system for leaders address the following?**

- a. *development of personal leadership attributes*: Staff is challenged to develop solutions and are given flexibility to express themselves.
- b. *development of organizational knowledge*: Shared through regular staff meetings to discuss changes affecting the organization.
- c. *ethical practices*: Senior management teaches ethical practices by leading through example.
- d. *your core competencies, strategic challenges, and accomplishment of action plans*: These functions are taught to staff by agency leadership to challenge them to perform in a way that enhances the operations of the LGOA.

**III.5.7 How do you identify and address key developmental and training needs, including job skills training, performance excellence training, diversity training, management and leadership development, new employee orientation and safety training? How do you evaluate the effectiveness of this education and training? How do you encourage on the job use of the new knowledge and skills?**

Individual training needs are addressed through the EPMS process, formal training opportunities, and attendance at conferences and seminars specifically related to job duties. Staff receives certification training for specific positions such as the LTC ombudsmen and IR&A specialists.

**III.5.8 How do you encourage on the job use of new knowledge and skills?**

The LGOA encourages use of new knowledge and skills to allow employees to develop new strategies that contribute to the overall mission of the agency.

**III.5.9 How does your employee training contribute to the achievement of your action plans?**

The LGOA utilizes trainings offered by the State Office of Human Resources, professional trainers, as well as internal training opportunities to enhance individual staff skills and knowledge.

**III.5.10 How do you evaluate the effectiveness of your workforce and leader training and development systems?**

The LGOA's system of workforce and leader training and development systems is determined by the quality of junior leaders to fill senior leadership positions through attrition. LGOA leadership successfully trains junior staff to meet future needs.

**III.5.11 How do you motivate your employees to develop and utilize their full potential?**

The LGOA maintains current and up to date EPMS documents on each employee which reflect the mission of the agency. Each employee understands the importance of their position as it relates to accomplishing that mission. Effective supervisory practices allow the employee to excel in areas that they find interesting. Employees are financially rewarded for additional knowledge, skills, abilities, initiative, and accomplishment.

**III.5.12 What formal and/or informal assessment methods and measures do you use to obtain information on workforce well-being, satisfaction, and motivation? How do you use other measures such as employee retention and grievances? How do you use this information?**

A variety of formal and informal methods are used in individual divisions to determine employee well-being, satisfaction, and motivation. The agency uses tools such as flex time; telecommuting (where advantageous to both the agency and the employee); training; competitive compensation through performance recognition; full staff meetings; division meetings; one-on-one meetings, as well as active participation through the Human Resources Office. Senior leadership determines priorities for improvement based upon a constant feedback process.

**III.5.13 How do you manage effective career progression and effective succession planning for your entire workforce throughout the organization?**

The LGOA is preparing staff to assume progressive positions in senior leadership. As senior leaders leave the workforce, the agency looks from within if possible to fill senior positions.

**III.5.14 How do you maintain a safe, secure, and healthy work environment? (Include your workplace preparedness for emergencies and disasters.)**

The LGOA has an excellent record in Worker's Compensation claims, and monitors staff activities to ensure and promote work place safety. The agency has a staff member designated as disaster coordinator, and has developed a plan to respond to disasters anywhere in the state. The agency is not located in a state facility, but does have an evacuation plan for fire or other catastrophes. The Wilbur Smith Building provides professional security onsite. In addition, the agency has a security camera and a receptionist that greets and screens visitors.

**III.6 Process Management****111.6.1 How do you determine, what are your organization's core competencies, and how do they relate to your mission, competitive environment, and action plans?**

The LGOA's core competencies are stated below. These competencies relate to the overall mission of enhancing the quality of life for South Carolina's seniors through advocating, planning, and developing resources in partnership with state and local governments, non-profits and the private sector, individuals, and advocates to meet the future needs of seniors.

- Administering the mandated responsibilities of the Older Americans Act
- Promoting easier access to services and allowing choices for seniors and their families
- Providing programs, education and information to help seniors prevent or delay the onset of chronic conditions that increase the risk of loss of independence and quality of life
- Developing ongoing public information/advocacy efforts to allow seniors and their families to make informed decisions and choices about the services they need
- Providing ongoing training and education activities to professional staff and seniors
- Providing services that increase social opportunities for seniors; aid in preventing Institutionalization; support caregivers and ensure help for seniors in emergencies
- Administering the LTC Ombudsman program as mandated under the OAA
- Developing programs for the prevention of elder abuse, neglect and exploitation
- Providing Elder Rights and Legal Assistance Programs for the elderly
- Planning, allocating, advocating for all federal and state resources
- Establishing and maintaining full administrative functions and activities to support the LGOA

- Enhancing research and data collection efforts on the status of seniors and the effectiveness of services through grant requests and use of available federal and state resources
- Meeting federal and state reporting requirements on a timely basis
- These processes are reviewed on a regular basis through regular Executive Staff review and ongoing monitoring of the Strategic Plan for achievement of key goals and objectives.

**111.6.2 How do you determine and what are your key work processes that produce, create or add value for your customers and your organization and how do they relate to your core competencies. How do you ensure these processes are used?**

- Administering the mandated responsibilities of the Older Americans Act
- Promoting easier access to services and allowing choices for seniors and their families
- Providing programs, education and information to help seniors prevent or delay the onset of chronic conditions that increase the risk of loss of independence and quality of life
- Developing ongoing public information/advocacy efforts to allow seniors and their families to make informed decisions and choices about the services they need
- Providing ongoing training and education activities to professional staff and seniors
- Providing services that increase social opportunities for seniors; aid in preventing institutionalization; support caregivers and ensure help for seniors in emergencies
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- Providing Elder Rights and Legal Assistance Programs for the elderly
- Planning, allocating, advocating for all federal and state resources
- Establishing and maintaining full administrative functions and activities to support the LGOA
- Enhancing research and data collection efforts on the status of seniors and the effectiveness of services through grant requests and use of available federal and state resources
- Meeting federal and state reporting requirements on a timely basis

**111.6.2 How do you incorporate organizational knowledge, new technology, cost controls, and other efficiency and effectiveness factors, such as cycle time, into process design and delivery?**

The LGOA uses its information technology effectively to document client counts; provide current demographic data; analyze functional limitations; document unmet needs for services; advocate for services, and ensure allocation of services to those most in need. It also uses information technology to reduce cycle time, or inefficiencies, through implementation of an internet-based registration system for the Summer School of Gerontology, use of "Go to Meeting" software to provide training and hold meetings via the internet, and use of cellular based technology to accomplish work statewide.

The LGOA takes advantage of grant opportunities that enable the agency to achieve research-based decision making and to utilize partnerships with research-oriented university groups to measure customer satisfaction and program effectiveness, such as the USC's evaluation of the Family Caregiver Support Program and survey of people who contacted the ADIC pilot site.

**111.6.3 How does your day-to-day operation of these processes ensure meeting key performance requirements?**

Performance is continuously monitored through information systems (*AIM*, *NAPIS*, and *SC Access*). Customer response is used to modify goals and objectives. Constant input from advisory and advocacy groups ensure a focus on key performance measures.

**111.6.4 How do you systematically evaluate and improve your key product and service related work processes?**

The Lieutenant Governor's Office and the LGOA systematically evaluate and improve key products and service-related processes through a strategic planning process and through the continuous feedback received from the organizations with which many customers and stakeholders interact. New processes and initiatives are developed based upon the continuous review process and from the feedback noted. The key



goal is to continually work for organizational improvement in terms of efficiency/effectiveness and product and service improvement.

#### 111.6.5 What are your key support processes, and how do you evaluate, improve and update these processes to achieve better performance?

- Administration of OAA, state and grant funding
- Development and monitoring of quality standards for OAA services
- Provision of information, referral, and assistance on available services
- Management Information System support
- Legislative information and external communications
- Training and certification of service providers
- Investigations of allegations of abuse, neglect and exploitation in LTC Facilities

Process outputs are continuously monitored by management staff. Customer satisfaction data is collected and reviewed, and routine audits are conducted. Changes and improvements are made based on the above reviews.

#### 111.6.6 How does your organization determine the resources needed to meet current and projected budget and financial obligations?

The Lieutenant Governor's Office and the LGOA senior leaders review available resources in relation to current and future needs and develop the projected budget based upon information from trends, public hearings and input from various advocacy and provider organizations. This is a process that is increasingly difficult during a recession period and shrinking state revenues. In addition, the LGOA carefully listens to input from its customers and stakeholders, and develops its budget according to sound business and financial management practices.

### III.7 Results

#### III.7.1 What are your performance levels and trends for the key measures of mission accomplishment and organizational effectiveness?

South Carolina faces an environment where its population is aging and resources are limited. Our environment is one with both opportunities and challenges, and it offers the opportunity for a quality life for our state's seniors if we plan well, administer our resources well, make wise decisions, and encourage seniors to take personal responsibility for their own health and well-being. This section will portray the demographics of aging and show the fiscal constraints in the state. Second, we show the demographics of the seniors that are served through the partnership with our Area Agencies on Aging and local service contractors. We then document success indicators that show our accomplishments and effectiveness as an organization in relation to our mission. Finally, we show additional trends that impact success in accomplishing our goals and objectives.

#### A. Aging Environment in South Carolina

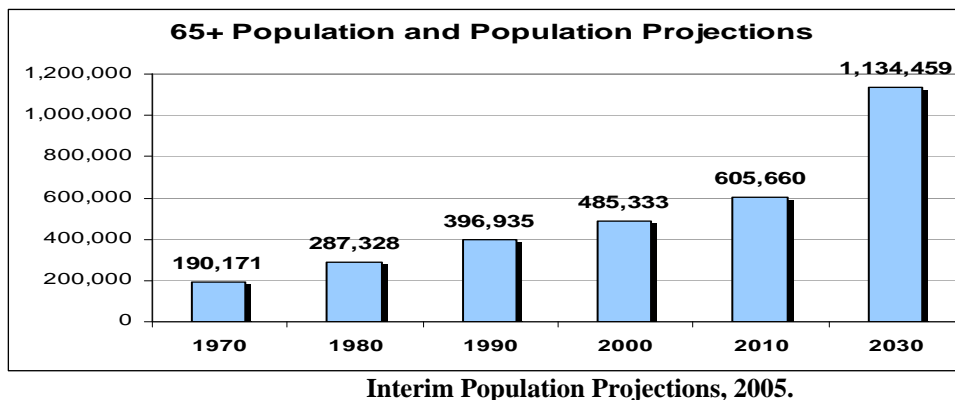


Figure  
Source:

III.7.1-1  
US Census Bureau,

Based upon first time driver's licenses issued to persons age 50 and over, and a significant jump in persons from 2002 - 2012, an estimated 411,596 persons could move to SC by 2012.

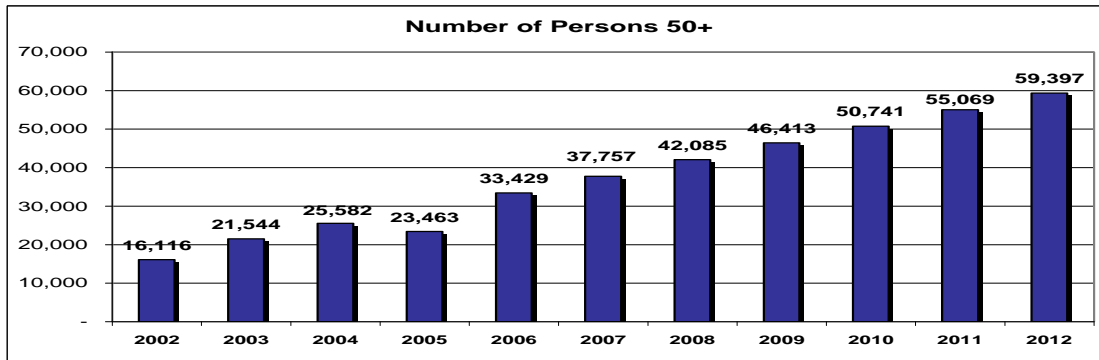


Figure III.7.1-2

Source: SC Department of Motor Vehicles. Estimate provided by the LGOA

In 1990, South Carolina was 37<sup>th</sup> in the nation for the percent of 65 and over population to total population. By 2030, South Carolina will be ranked 15<sup>th</sup> in the nation.

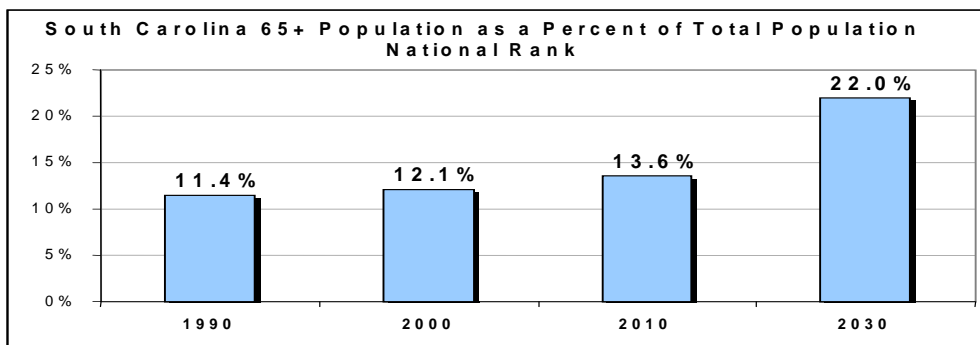


Figure III.7.1-3

Source: US Census Bureau, Interim Population Projections, 2005.

In 2009, there were over 50,000 persons in South Carolina 65 and older with Alzheimer's disease. By 2030, it is estimated that there will be 90,000 persons.

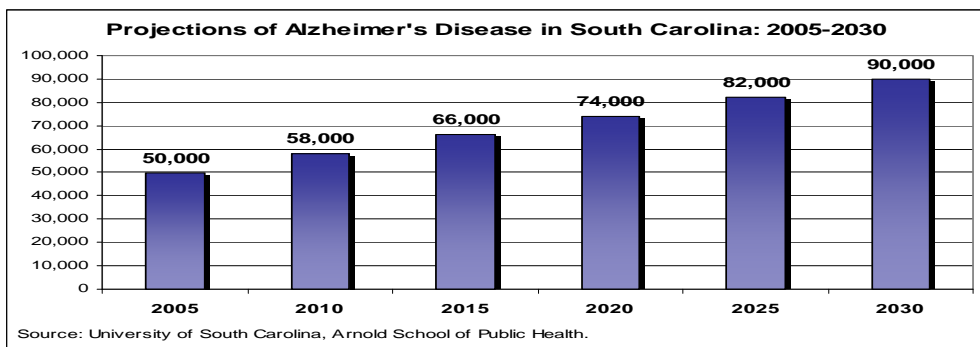


Figure III.7.1-4

### Characteristics of Aging Clients Based on Assessment for Services

**Activities of Daily Living (ADLs)** are Walking/Mobility; Dressing; Eating; Toileting; Transferring; and Bathing

**Instrumental Activities of Daily Living (IADLs)** are Meal Preparation; Light/Heavy Housekeeping; Telephone Use; Money Management; Shopping; and Medication Management

**Lacks Support** means client needs help and/or someone to check on them during an evacuation or disaster OR needs help in caregiver area OR lives alone.

**Below Poverty** means below 100% poverty.

**Nutritionally at Risk** is a score based on assessment of eating habits.

**Mentally Disabled** means Alzheimer's or Related Dementia, Behavioral or Mental Health Problems

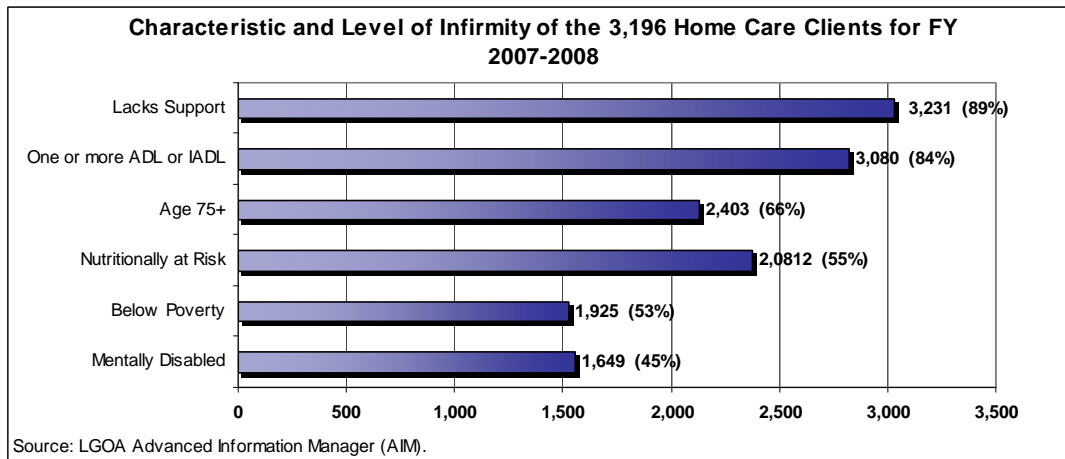


Figure III.7.1-5

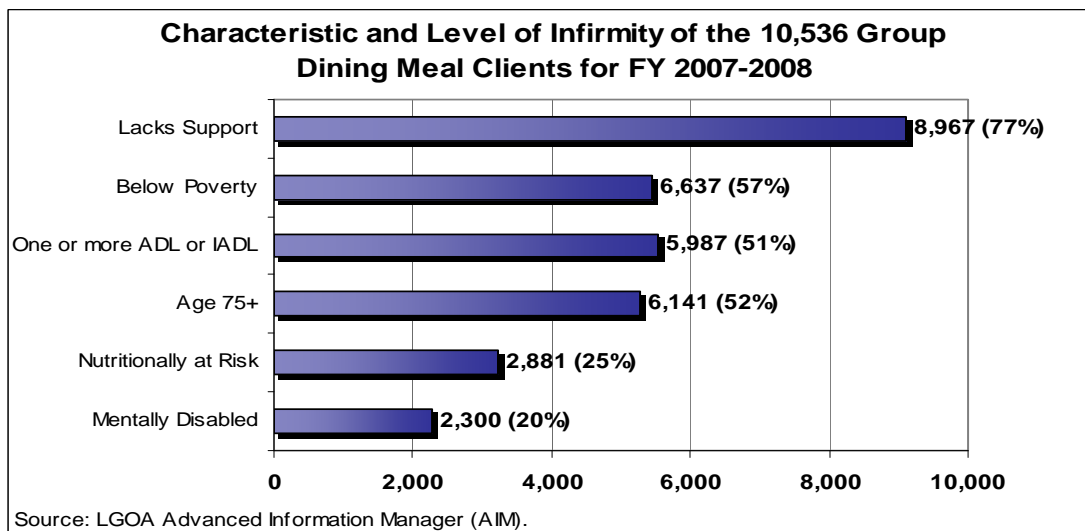


Figure III. 7.1-6

The Lieutenant Governor's Office and the LGOA have provided the latest information available in its results section of this year's State Accountability Report. The National Aging Program Information System (NAPIS), the Caregiver Reporting System, and the National Ombudsman Reporting Systems are compiled based upon federal reporting requirements. Because of this, 2007 data is the latest available. 2009 data is due January 2010, and is therefore not available for this report. 2009 data is provided wherever possible for results indicators. The following two charts, Total Funding and Title III Funding show the major services funded under the Older Americans Act, state and all other sources of funding. 92% of all funds are utilized in four services: home delivered meals, group dining meals, transportation and home care. All other services comprise 8% of available funding.

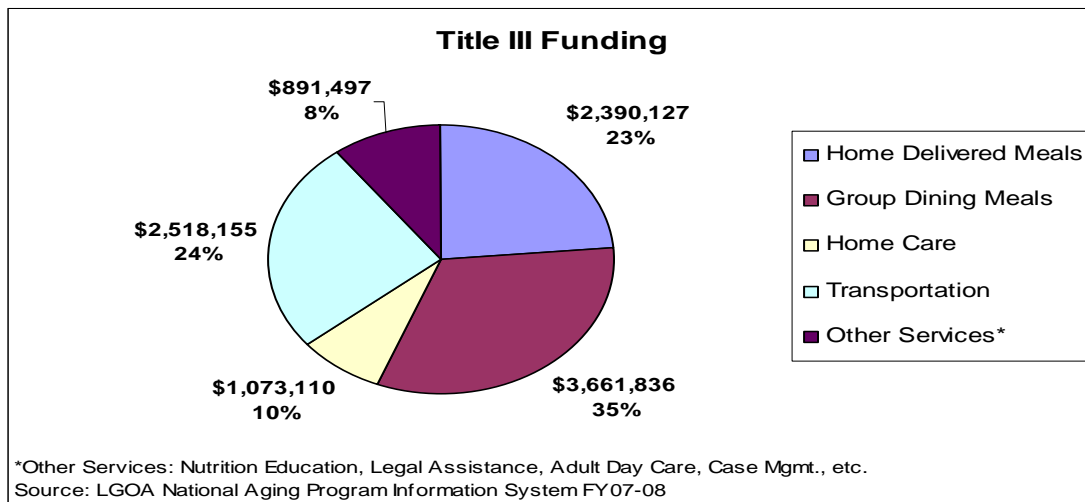


Figure III.7.1-7

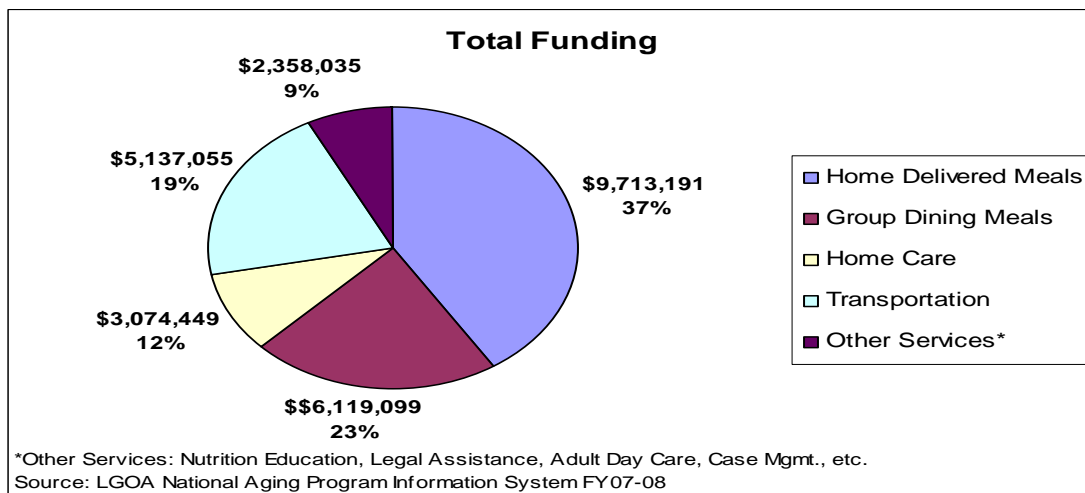


Figure III.7.1-8

The following charts on Older Americans Act services provide a picture of utilization of the core services funded over a period of ten years. During which time no major increase in funding occurred. Three charts below show the number of clients served, units provided and the change in unit cost over this time period.

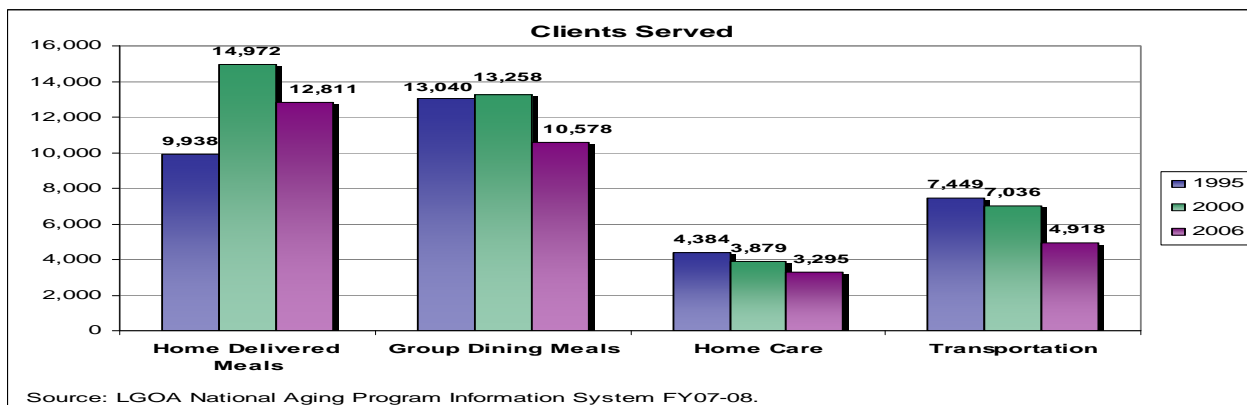


Figure III.7.1-9

2007

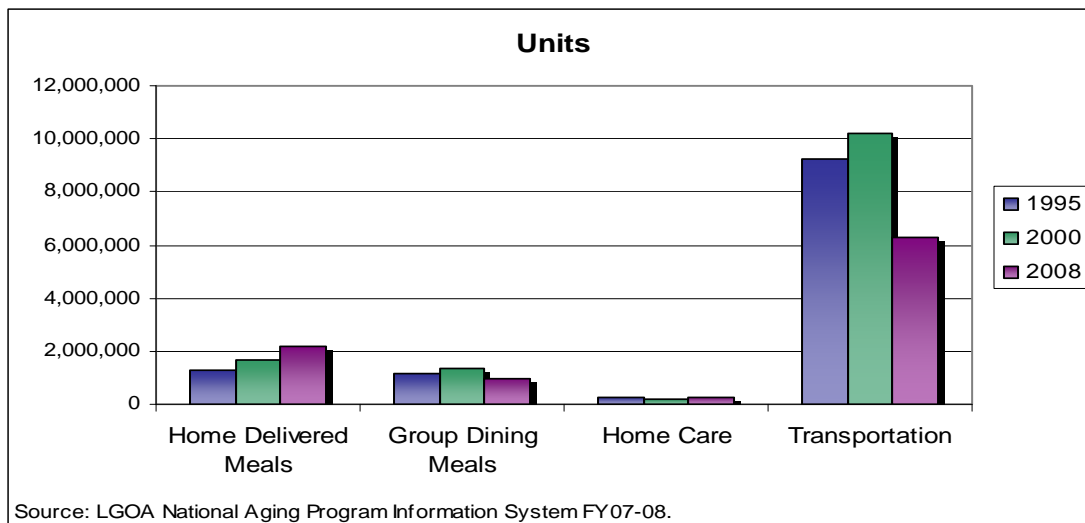


Figure III.7.1-10

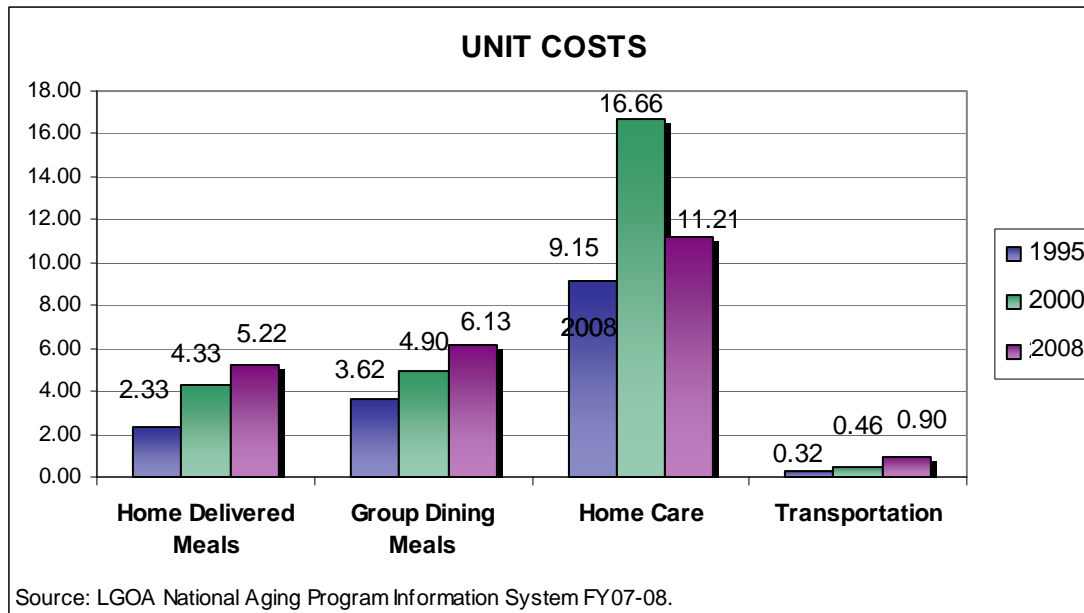


Figure III.7.1-11

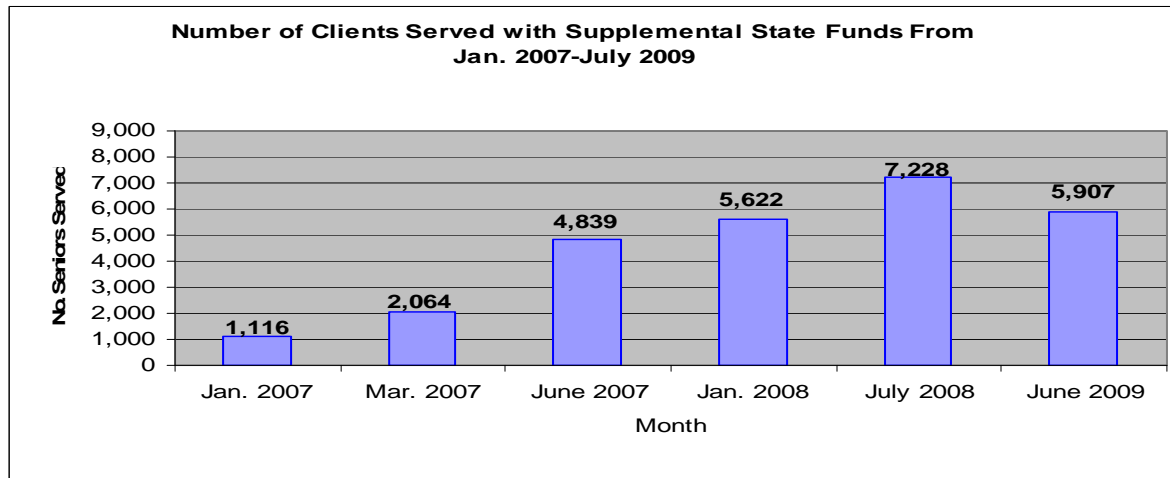
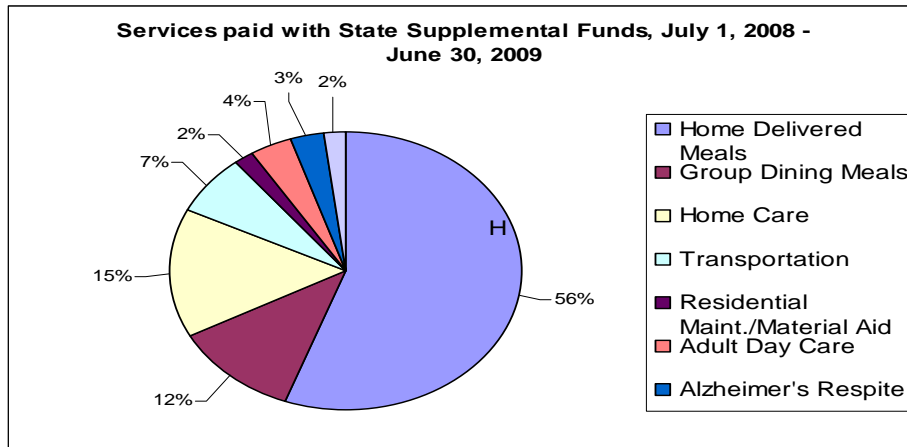
**Supplemental State Funds for Home and Community Based Services.** The Legislature provided \$2.9 million in non-recurring (one year only) funds to the LGOA for home and community based services to South Carolina seniors for FY 2008-2009. As of June, 2009, 5,907 seniors were receiving services statewide. More seniors than anticipated have been assisted due to the types of services provided. In 2007, the LGOA surveyed a significant number of its recipients to see what the impact has been. Some of the findings include:

- 1,097 persons surveyed, 336 responded
- 96.5% thought the quality of the service was very satisfactory or satisfactory
- 98.7% thought the service met their needs
- 90.8% thought the service helped them stay at home
- 58.7% were willing or able to pay for part of their service

The LGOA has also reviewed its *AIM* reporting system for a profile of South Carolina's seniors currently being served by home and community based services funded by Supplemental State Funds. Of the 5,907 seniors receiving the new home and community based services we see the following:

- 47% are nutritionally at risk

- 86% lack support (need help or someone to check on them during evacuation or disaster, needs caregiver assistance and live alone)
- 54% have incomes less than the federal poverty level
- 47% live alone
- 55% live in rural areas
- 55% are 75 and older
- 36% are 80 and older

**Figure 7.1-12****Figure 7.1-13**

**Supplemental State Funds Expenditures  
Calendar Year 2009**

**January 1, 2008- December 31, 2008**

**Lieutenant Governor's Office on Aging**

<b>County</b>	<b># of seniors served from Jan. 1, 2008 – Dec. 31, 2008 with State Supplemental Funding</b>	<b>County</b>	<b># of seniors served from Jan. 1, 2008 – Dec. 31, 2008 with State Supplemental Funding</b>
Abbeville	51	Greenwood	106
Aiken	430	Hampton	66
Allendale	50	Horry	195
Anderson	81	Jasper	108
Bamberg	36	Kershaw	49
Barnwell	45	Lancaster	81
Beaufort	82	Laurens	76
Berkeley	131	Lee	55
Calhoun	37	Lexington	321
Charleston	134	McCormick	82
Cherokee	88	Marion	68
Chester	53	Marlboro	17
Chesterfield	55	Newberry	51
Clarendon	87	Oconee	93
Colleton	86	Orangeburg	123
Darlington	161	Pickens	145
Dillon	75	Richland	82
Dorchester	97	Saluda	89
Edgefield	52	Spartanburg	520
Fairfield	42	Sumter	170
Florence	103	Union	59
Georgetown	95	Williamsburg	36
Greenville	837	York	118

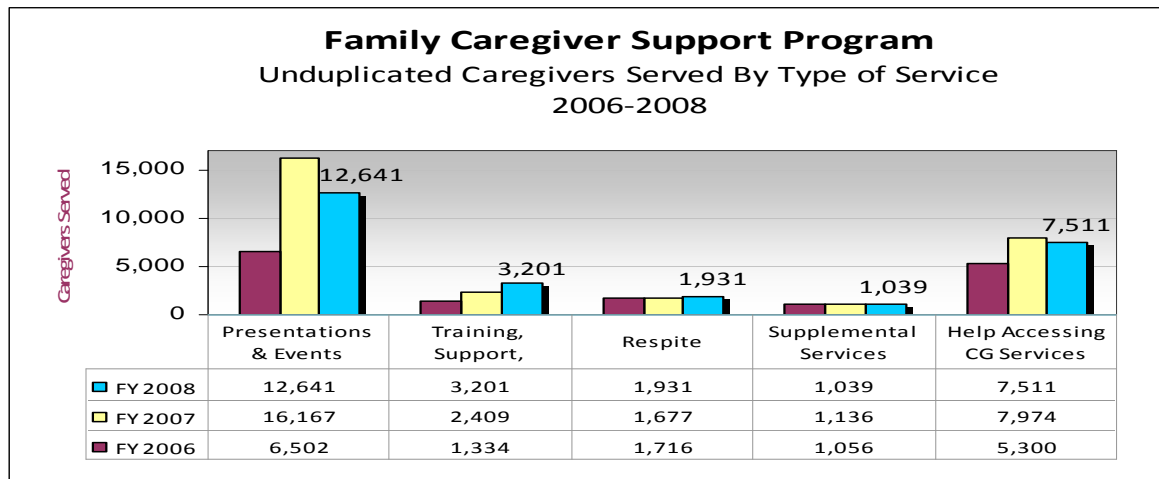
## **B. Success Indicators**

**Family Caregiver Support Program.** Family Caregivers in South Carolina: In South Carolina, 45% of adults over the age of 65 have a disability, but most of these adults are able to remain in their homes and communities due to the care and support of family members. One in five adults in South Carolina is a family caregiver. These unpaid family caregivers provide 80% of all the long term care in the state. *Over 560,000 family caregivers in SC provide 610 million hours of 'free' services to their chronically ill, disabled, or frail elderly loved ones. If their services had to be replaced by even low-paid health care workers, the cost would be more than \$5.5 billion each year.* The 'free' care provided willingly by family members often has a great physical and financial cost for these caregivers. Studies show that family caregivers are at higher risk for stress, depression, physical and financial problems, and increased mortality. The average caregiver foregoes \$659,139 in salary and retirement benefits over the course of a lifetime. These problems may impede the caregiver's ability to give care today and support their own care needs in the future.

Respite, Counseling and Support are Shown to Lessen Costs: Respite (taking regular short breaks from caregiving) decreases the risk to caregivers, reduces the risk of acute hospital admissions, and helps prevent

or delay costly placements in assisted living facilities or nursing homes. Caregiver counseling and support is shown to improve caregiver health outcomes and extend caregiving.

**Best Practice:** The unpaid care provided by family and friends translates into tremendous savings in public monies. However, caregivers may need supportive services in order to maintain their role. The South Carolina Family Caregiver Support Program (FCSP) is a statewide consumer-directed program that builds on current research and best practice to provide a statewide infrastructure to support family caregivers who are the backbone of our long-term care system in SC. Eleven regional Family Caregiver Advocates across the state work one-on-one with family caregivers providing counseling, assessment, training, respite, and help finding resources. They also administer a system of mini-grants that caregivers may use to purchase respite and other needed services from the provider of their choice. These services allow caregivers to continue the hard work of caregiving, delaying or avoiding costly institutionalization.



**Figure III.7.1.14**

Source: LGOA Caregiver Data System

In 2008, the Family Caregiver Support Program (FCSP) helped 7,511 unpaid family caregivers access existing community services. More than 14,532 calls or visits were provided by a network of 11 full time Family Caregiver Advocates located at the AAAs. A total of 12,641 family caregivers received information about the FCSP and caregiving issues. 3,201 family caregivers received counseling, training and/or support services. 1,931 family Caregivers received small, one-time grants to purchase respite services from the provider of their choice, purchasing 158,911 hours of respite. 1,039 family caregivers received small one-time grants to purchase other needed services or supplies, such as incontinence supplies; chore or homemaker services; assistive technology; emergency response monitoring; nutritional supplements, transportation, or wheelchair ramps.



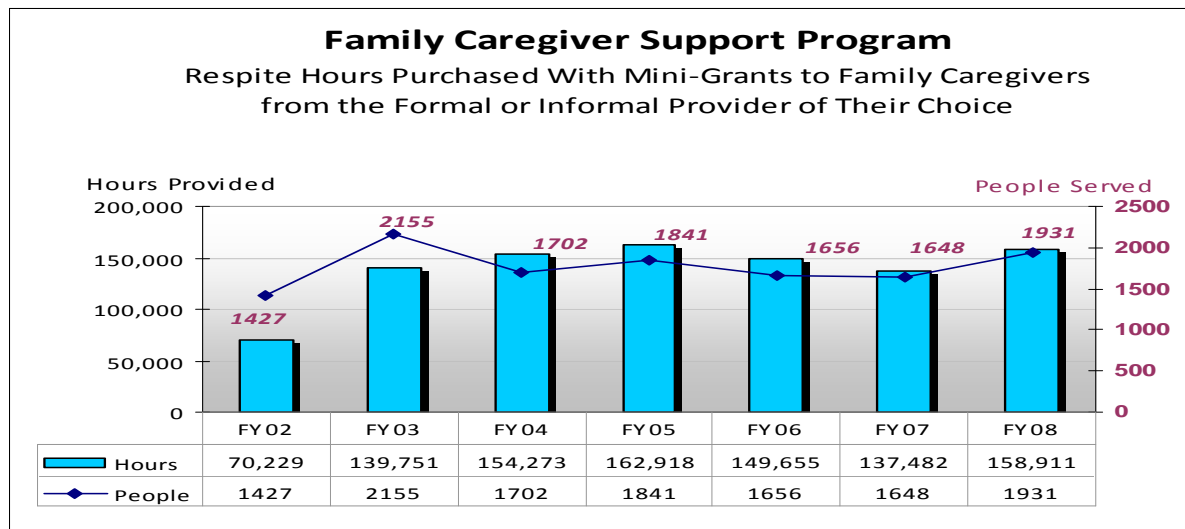


Figure II.7.1.15

Source: LGOA Caregiver Data System

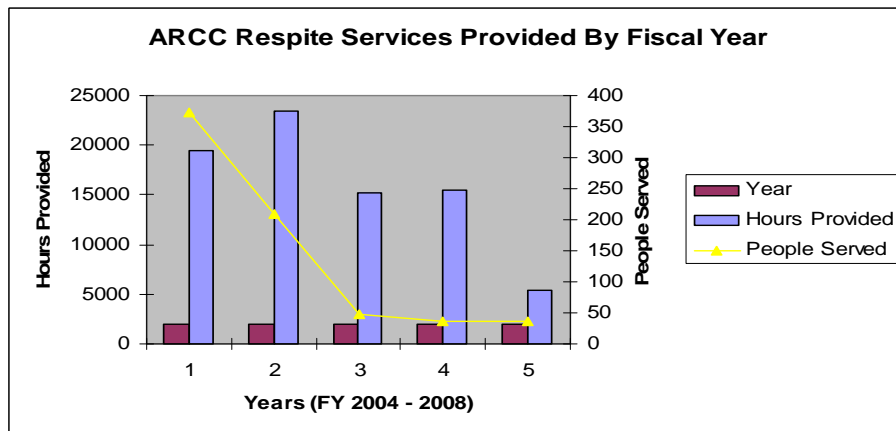
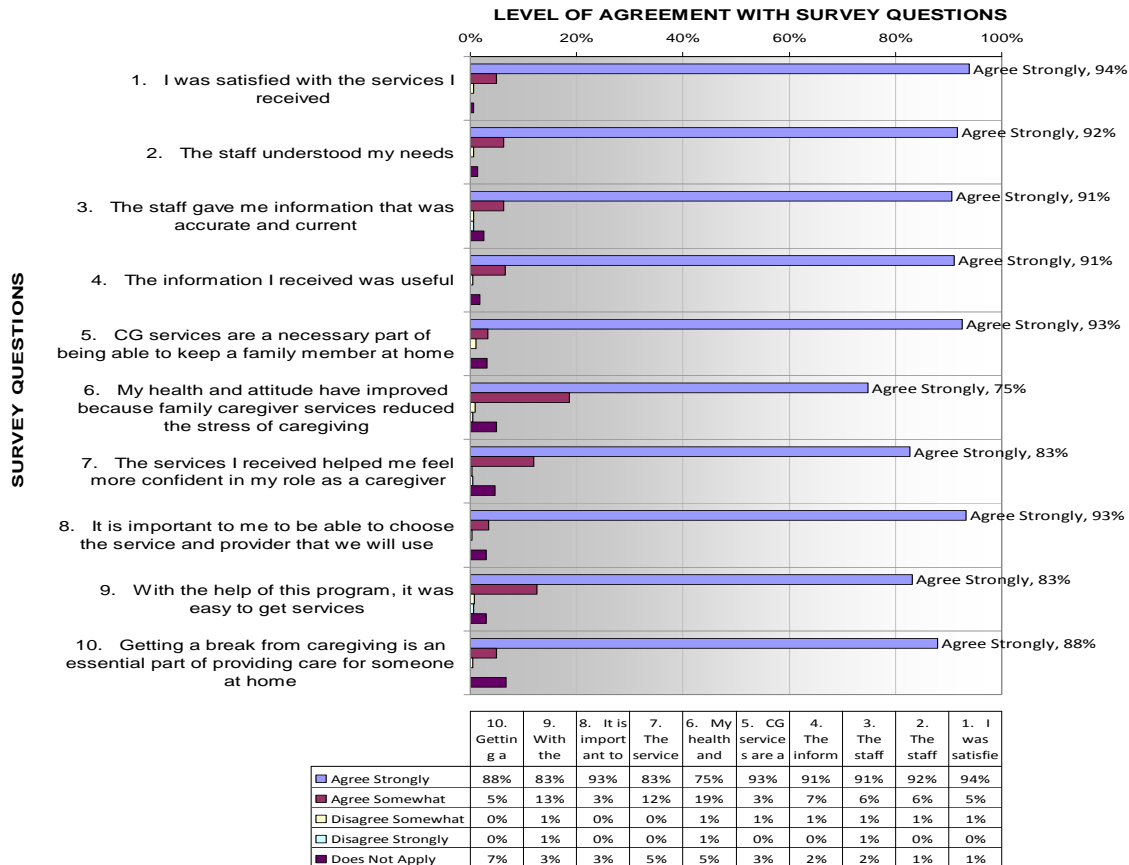
The Family Caregiver Support Program accommodates peoples' needs and preferences by offering choice and control over the services they use. Caregivers choose from a menu of services and may use a small grant (federal, state, and local funds) to purchase respite and/or supplemental services from the provider of their choice or arrange for a neighbor or family member to provide in-home respite. Making careful choices, the average caregiver who received a small grant in 2008 was able to purchase 82 hours of respite, at an average of \$5.99 per hour.

**B. Customer Satisfaction with Family Caregiver Support Program.** Responses from 780 family caregivers, served in 2008, showed that respondents *'strongly agreed'*: that they were satisfied with the services they received (94%); that services they received help them feel more confident in their role as caregiver (83%); and that caregiver services are a necessary part of being able to keep a family member at home (93%).

### Family Caregiver Support Program

#### Caregiver Satisfaction Survey Results 2008

*n* = 780



**Figure III.7.1-16**  
Source: LGOA Caregiver Data System

Figure III.7.1-18 in Fiscal Year 2008-2009, 61 educational programs were conducted and 65 support group sessions were supported through ARCC grant funds. In FY 08-09, 37 people were served in respite with 5,397 hours provided.

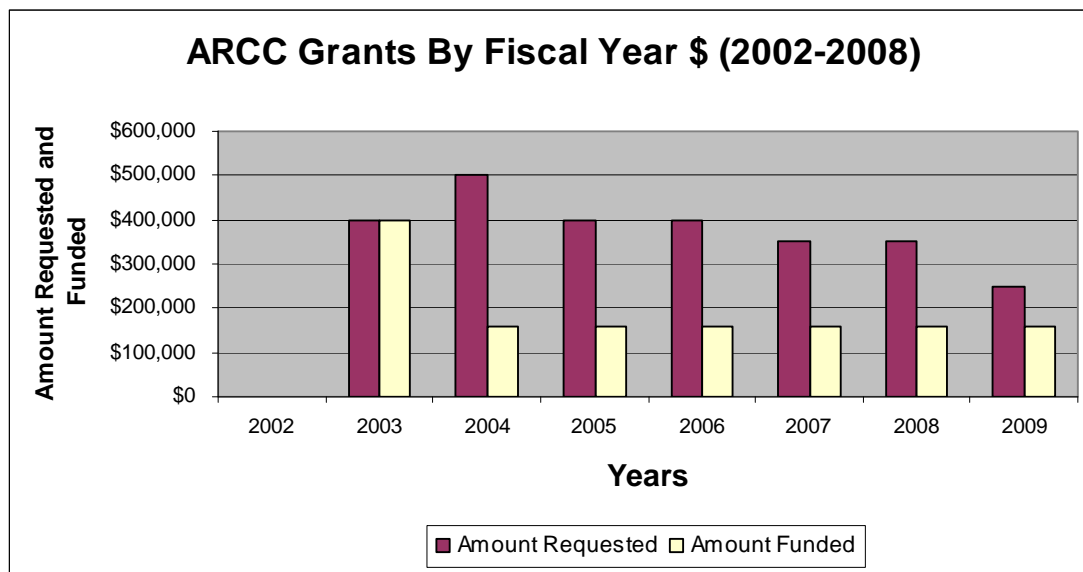


Figure III.7.1-17

Source: LGOA Caregiver Data System Reports

(FY 2008-2009 amount requested was \$247,500; amount funded \$157,500)

### Information and Referral Services

Information is available through the *SC Access* website, or by contacting an I/R&A Specialist who can provide assistance in linking callers to agencies or in understanding eligibility requirements for publicly supported services. The LGOA provides funding and training for regional I/R&A Specialists located within the AAAs. These specialists are certified through the Alliance for Information and Referral Systems' (AIRS) national certification process.

### Regional I&R Specialist Totals By AAA Regions 1-10 July 2008 – June 2009

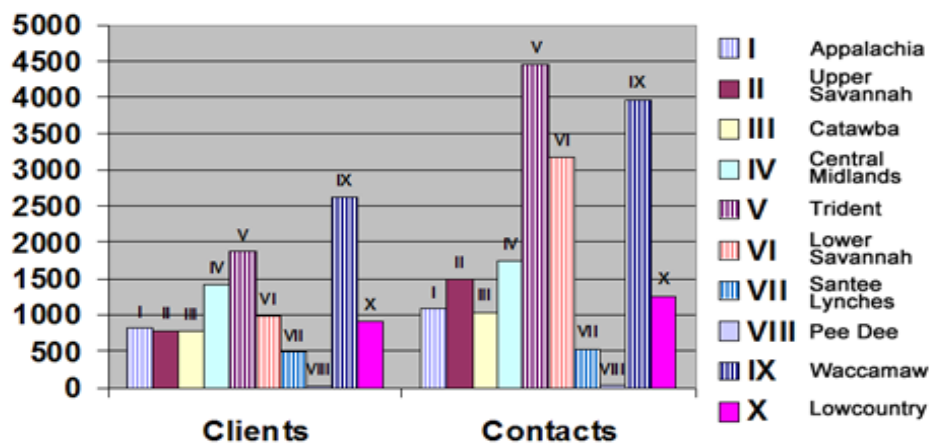


Figure III.7.1-18

Source: VisionLink, Tapestry web reports

### SC Access Successful Page Views July 2008 – June 2009

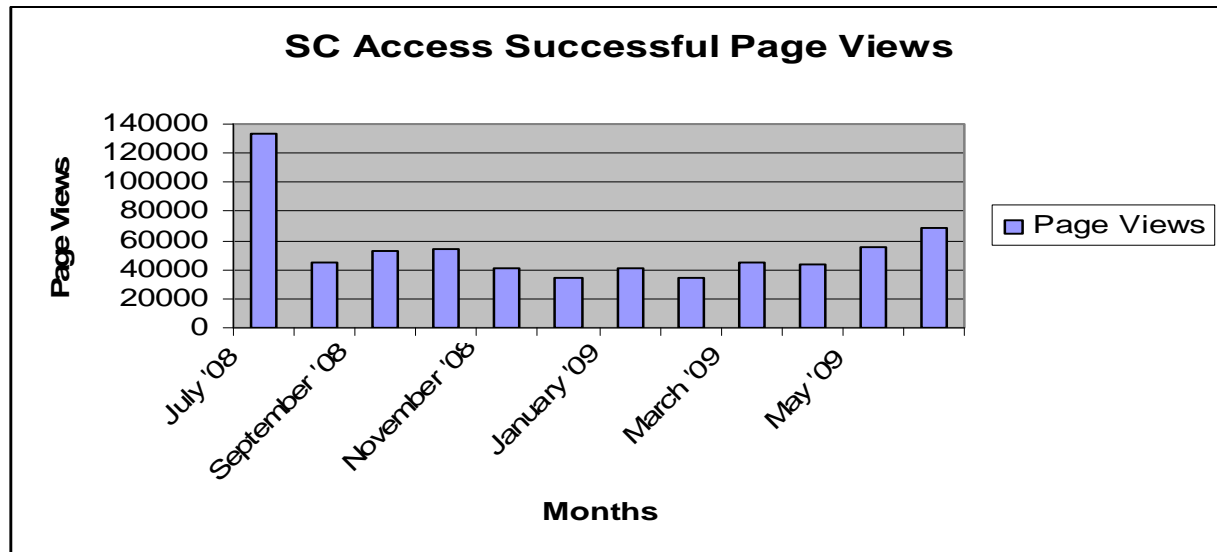


Figure III.7.1-19

Source: VisionLink, Tapestry web reports

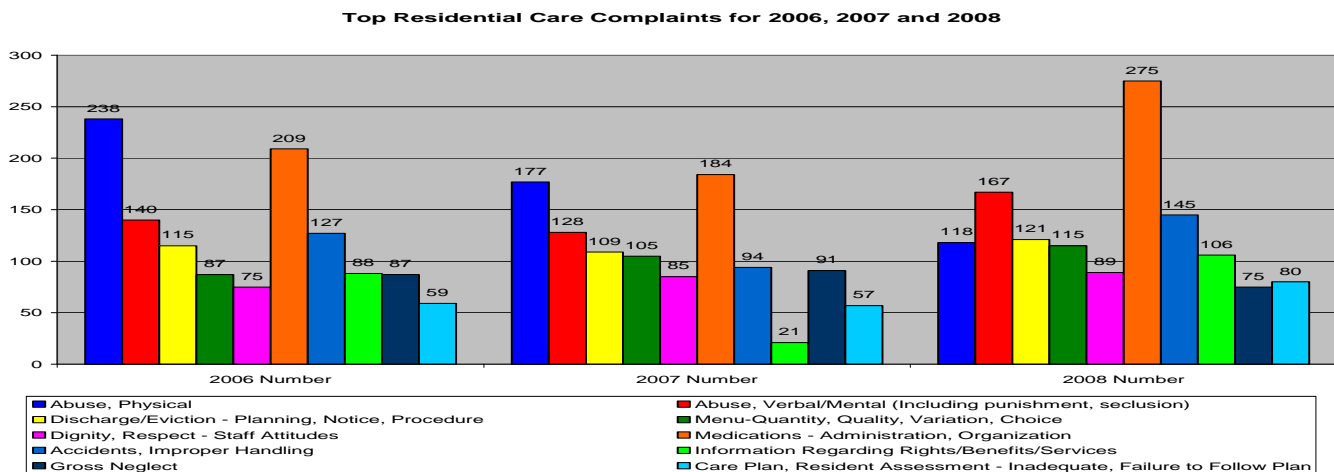
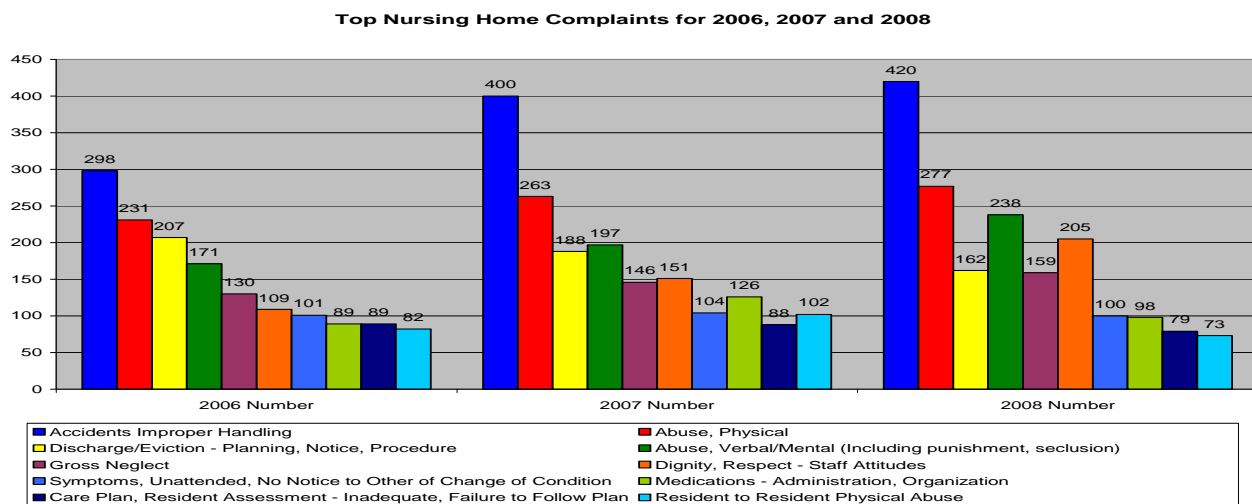
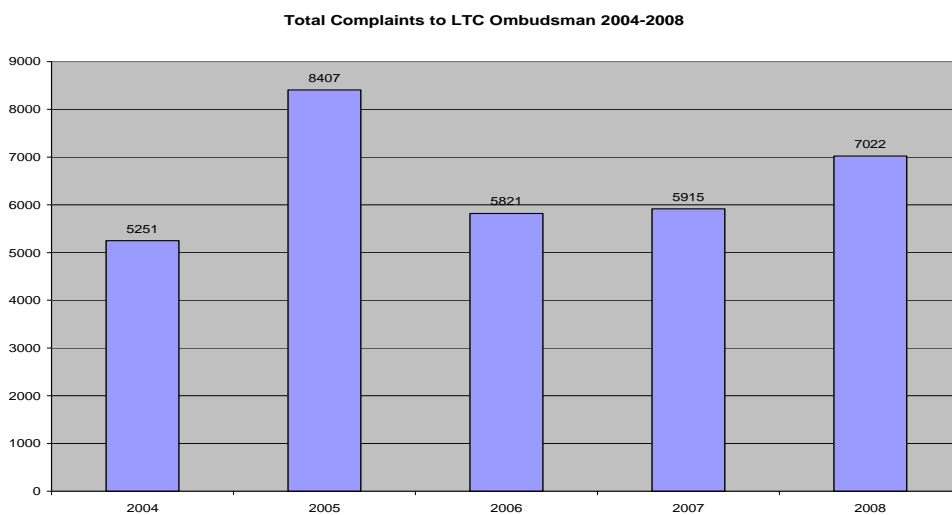
### SC Access Web Hits by Month

<b>July 2008</b> Web Hits: 333,000 Average per day: 10,742	<b>January 2009</b> Web Hits: 260,399 Average per day: 8,400
<b>August 2008</b> Web Hits: 243,161 Average per day: 7,844	<b>February 2009</b> Web Hits: 241,453 Average per day: 8,623
<b>September 2008</b> Web Hits: 297,470 Average per day: 9,916	<b>March 2009</b> Web Hits: 278,883 Average per day: 8,996
<b>October 2008</b> Web Hits: 338,453 Average per day: 10,918	<b>April 2009</b> Web Hits: 279,364 Average per day: 9,312
<b>November 2008</b> Web Hits: 274,010 Average per day: 9,134	<b>May 2009</b> Web Hits: 329,933 Average per day: 10,643
<b>December 2008</b> Web Hits: 215,432 Average per day: 6,949	<b>June 2009</b> Web Hits: 369,694 Average per day: 12,323

Figure: III.7-1.20

Source: VisionLink, Tapestry web reports

**Ombudsman Program.** The Long Term Care System is multi-faceted with complaints ranging from physical and verbal abuse to failure to follow a Care Plan for a resident. The Long Term Care Ombudsman is responsible for advocating for rights for LTC residents, and investigating abuse, neglect, and exploitation of these residents.

**Figure III.7.1-21****Source: National Ombudsman Reporting System (NORS)****Figure III.7.1-22****Source: National Ombudsman Reporting System (NORS)****Figure III.7.1-23****Source: National Ombudsman Reporting System (NORS)**

Actions Taken on Complaints Made to LTC Ombudsman: 2008

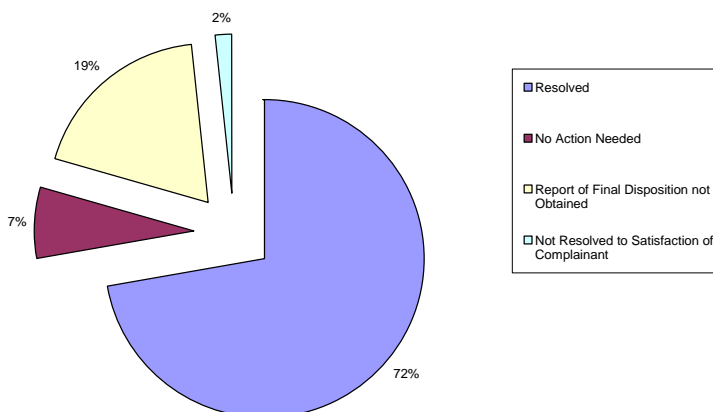


Figure III.7.1-24

Source: National Ombudsman Reporting System (NORS)

Key Measures of Program Accomplishments 2008

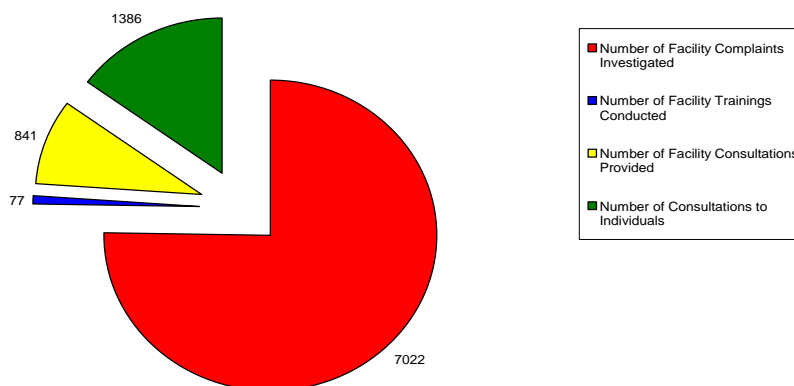
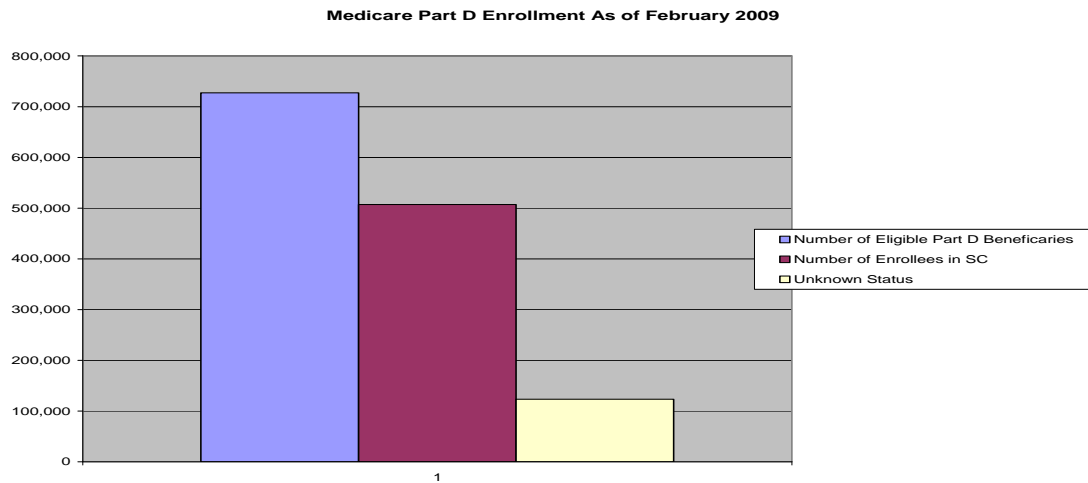


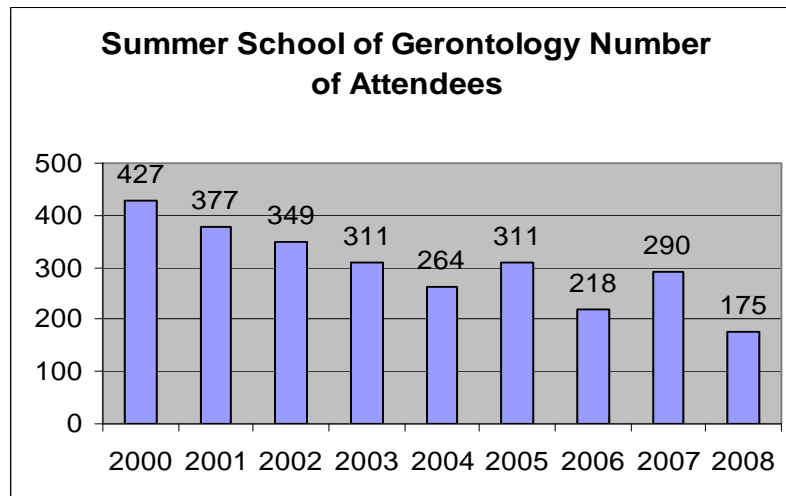
Figure III.7.1-25

Source: National Ombudsman Reporting System (NORS)

**Medicare Part D.** The LGOA maintains a close working relationship with the Social Security Administration (SSA) and the Centers for Medicare and Medicaid Services (CMS) to assist seniors and disabled persons with access to prescription drug coverage.

**Figure III.7.1-26**

- C. **Trends.** Federal dollars have increased slightly but State dollars have remained flat until Fiscal Year 2006-2007 when the LGOA received an additional \$2.9 million for home and community based services. The \$2.9 million has been funded for Fiscal Year 2008-2009 and Fiscal Year 2009-2010. In Fiscal Year 2009-2010 the supplemental funds have been restricted to meals, and cannot not be used for all home and community based services as in previous years.

**Figure III.7.1-27**  
Source: LGOA**Figure III.7.1-28**  
Source: LGOA

The August 2009 Summer School was not held in 2009 in order to save funds, but training was still provided through routine LGOA meetings with AAA's, COA's and Aging Network organizations. The Summer School of Gerontology has previously been held for 30 years for the certification and enrichment of professionals in the state's senior services network, and for professionals in state agencies, local organizations, etc.

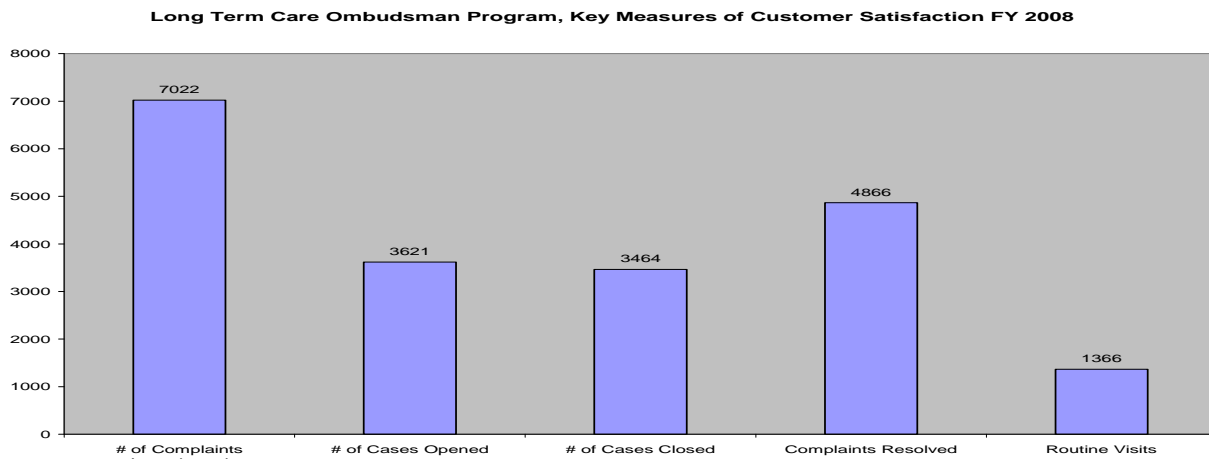
### III.7.2 What are your performance levels and trends for key measures of customer satisfaction?

The LGOA periodically conducts customer satisfaction surveys. The major effort during Fiscal Year 2005-2009 has been administering the Advanced Performance Outcomes Measurement Program (POMP grants that have addressed the value and impact of home and community based services on the well-being of seniors receiving them. Since the move to the Lieutenant Governor's office, the LGOA has reorganized to meet the

changing environment and needs of the state's growing senior population. As a result of our evidence-based research and the effective partnership of the AARP, Adult Day Services Association, the SC Association of Area Agencies on Aging, the SC Association of Councils on Aging, Protection and Advocacy for People with Disabilities, the SC National Association of Social Workers, the SC Health Care Association, the Disability Action Council, and Disability Solutions, the state legislature appropriated \$2.9 million in supplemental funding for home and community based services for Fiscal Year 2008-2009.

As a result of this appropriation, the LGOA has implemented a plan to provide additional services to eligible seniors through its state-funded home and community based services effort.

**A. Customer Satisfaction with the Long Term Care Ombudsman program.** The program's primary responsibility is identifying, investigating, and resolving complaints that are made by or on behalf of, residents of long term care facilities.



**Figure III.7.2-1**

**Source: National Ombudsman Reporting System (NORS)**

**B. Customer Satisfaction with Family Caregiver Support Program.** Findings concerning family caregiver support services were validated when an outcomes tool developed by the LGOA and USC was tested in May 2006. 100 caregivers were interviewed, and asked to rate the overall support and services that the care receiver receives from the Family Caregiver Support Program. 93% were rated as excellent, very good, or good. 82% of respondents felt that the services provided by the FCSP enabled them to provide care for a longer time than would have been possible without these services. When asked the extent to which the program helped with difficulties that result from caregiving, 84% said it was very helpful. The LGOA continues to work to provide customer satisfaction with the Family Caregiver Support Program.

**C. Customer Satisfaction with the Aging and Disability Resource Information Centers**

The Center for Health Services and Policy Research at the USC Arnold School of Public Health has been assessing consumer satisfaction in all five ADRC regions by way of a 25-question consumer satisfaction survey. The Survey instrument is, has been, and will continue to be mailed bi-weekly to a simple random sample of consumers identified from the SC Access Tapestry database. The interim results suggest an overall satisfaction with 25 of the 25 indices assessed.

**III.7.3 What are your performance levels for the key measures of financial performance, including measures of cost containment, as appropriate?**

Fiscal staff continuously monitors fiscal data to ensure that agency operations remain within appropriated funds. An annual state audit is conducted to ensure sound fiscal management.



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**III.7.4 What are your performance levels and trends for the key measures of workforce engagement, workforce satisfaction, the development of your workforce, including leaders, workforce retention, workforce climate including workplace health, safety, and security?**

The LGOA is still evolving and has not developed significant trends. The LGOA has had six directors with different management styles and priorities. Staff turnover increased due to shrinking budgets, retirement eligibility, disability, and personal choices to pursue other opportunities. As a result of turnover, opportunities for internal promotions were available. The agency has made available ample resources and training opportunities to enable employees to successfully perform their jobs.

**III.7.5 What are your performance levels and trends for your key measures of organizational effectiveness/operational efficiency, and work system performance (these could include measures related to the following: product, service, and work system innovation rates and improvement results; improvements to cycle time; supplier and partner performance; and results related to emergency drills or exercises.)**

Measurement of performance levels is conducted by Deputy Directors/Senior staff with individual staff evaluations. The Director and the Human Resource Office are directly involved with divisional leaders in all evaluations as well. LGOA staff is provided copies of the agency emergency plan and safety drills are held throughout the year. Staff discusses these policies at staff meetings and briefings with divisional leaders.

**III.7.6 What are your performance levels and trends for the key measures of regulatory/legal compliance and community support?**

The LGOA actively participates in the Human Resources Advisory meetings as well as the SCIPMA. Human Resource staff is also a member of the South Carolina Chapter of the Society of Human Resources Management (SHRM).